

TITLE 59: MENTAL HEALTH
CHAPTER I: DEPARTMENT OF HUMAN SERVICES

PART 115
STANDARDS AND LICENSURE REQUIREMENTS FOR
COMMUNITY-INTEGRATED LIVING ARRANGEMENTS

SUBPART A: GENERAL PROVISIONS

Section

115.100 Purpose
115.110 Incorporation by reference
115.120 Definitions
115.130 Rate Components

SUBPART B: SERVICE REQUIREMENTS

Section

115.200 Description
115.205 Respite ~~Services~~services for ~~Persons~~persons with a Developmental Disability~~developmental disability~~
115.210 Criteria for Participation~~participation~~ of Individuals~~individuals~~
115.214 Individuals Requiring Additional Services and Support
115.215 Criteria for Termination from a CILA Agency~~termination of individuals~~
115.220 Services and Supports~~Community support team~~
115.225 Assessments
115.230 Person-Centered Planning~~Interdisciplinary process~~
115.240 Medical Services~~services~~ and Medications~~medications~~
115.245 Restraints
115.250 Individual Rights~~rights~~ and Confidentiality~~confidentiality~~

SUBPART C: GENERAL AGENCY REQUIREMENTS

Section

115.300 Environmental Management~~management~~ of Living Arrangements~~living arrangements~~
115.310 Geographic Location~~location~~ of Community-Integrated Living Arrangements~~community-integrated living arrangements~~
115.320 Administrative Requirements~~requirements~~
115.321 Application for Waiver~~waiver~~ of the Prohibition Against Employment~~prohibition against employment~~
115.325 Monitoring and Evaluation~~evaluation~~
115.326 Monitors and Receiverships

44 115.330 Accreditation (Repealed)

45

46 SUBPART D: LICENSURE REQUIREMENTS

47

48 Section

49 115.400 Applicability

50 115.410 License Application~~application~~

51 115.420 Application Acceptance~~acceptance~~ and Verification~~verification~~

52 115.430 Issuing a License~~license~~ and Period~~period~~ of Licensure~~licensure~~

53 115.440 License Sanctions~~sanctions~~ and Revocation~~revocation~~

54 115.450 Non-transferability of license

55 115.460 Cessation of Operations~~operations~~

56 115.470 Hearings

57

58 SUBPART E: HOST FAMILY LIVING ARRANGEMENTS

59

60 Section

61 115.500 Program Description

62 115.510 Compliance with this Part

63 115.520 Program Requirements~~requirements~~

64 115.530 Compatibility~~Pairing~~ of Individuals~~individuals~~ and Host Families~~host families~~

65 115.540 Department Approval~~approval~~ of Host Family Services~~host family services~~

66 115.550 Number of Individuals Served~~individuals served~~ in Host Family Settings~~host family settings~~

67
68 115.560 Number of Individuals Living~~individuals living~~ in Host Family Settings~~host family settings~~

69
70 115.570 CILA Agency Requirements~~Provider requirements~~

71 115.580 24-Hour Service~~24-hour service~~

72 115.590 Minimum CILA Agency/Caregiver Contract Requirements~~agency/caregiver contract requirements~~

73
74 115.600 Relief Services~~services~~

75 115.610 Conflicts of interest

76 115.620 Quality Assurance Plan~~assurance plan~~

77

78 SUBPART F: REIMBURSEMENT RATE COMPONENTS

79

80 Section

81 115.700 Purpose (Repealed)

82 115.710 Rate Components~~components~~ (Repealed)

83

84 115.APPENDIX A Specific Level of Functioning Assessment and Physical Health
85 Inventory (Repealed)

86

AUTHORITY: Implementing the Community-Integrated Living Arrangements Licensure and Certification Act [210 ILCS 135] and the Health Care Worker Background Check Act [225 ILCS 46], and authorized by Section 5-104 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/5-104] and Section 5 of the Mental Health and Developmental Disabilities Administrative Act [20 ILCS 1705/5].

SOURCE: Adopted at 14 Ill. Reg. 10865, effective July 1, 1990; emergency amendment at 14 Ill. Reg. 20550, effective December 5, 1990, for a maximum of 150 days; emergency expired May 18, 1991; amended at 15 Ill. Reg. 8560, effective May 24, 1991; emergency amendment at 16 Ill. Reg. 2676, effective February 1, 1992, for a maximum of 150 days; emergency expired on June 30, 1992; amended at 17 Ill. Reg. 21434, effective November 29, 1993; amended at 21 Ill. Reg. 2205, effective February 1, 1997; amended at 21 Ill. Reg. 6085, effective May 5, 1997; amended at 21 Ill. Reg. 8332, effective June 25, 1997; recodified from the Department of Mental Health and Developmental Disabilities to the Department of Human Services at 21 Ill. Reg. 9321; amended at 22 Ill. Reg. 8382, effective April 28, 1998; amended at 23 Ill. Reg. 9791, effective August 13, 1999; amended at 24 Ill. Reg. 16313, effective October 12, 2000; amended at 27 Ill. Reg. 5376, effective March 17, 2003; amended at 47 Ill. Reg. _____, effective _____.

SUBPART A: GENERAL PROVISIONS

Section 115.100 Purpose

- a) The intent of this Part is to provide uniform direction for the licensure and operation of Community-Integrated Living Arrangement (CILA) agencies that provide residential~~purpose of the Community-Integrated Living Arrangements Licensure and Certification Act [210 ILCS 135] is to license agencies to certify living arrangements integrated in the community in which individuals with a mental disability are supervised and provided with an array of needed services to~~ individuals with developmental disabilities [Community-Integrated Living Arrangements (CILA) Licensure and Certification Act [210 ILCS 135].
- b) The objective of a community-integrated living arrangement is to support~~promote optimal independence in daily living and economic self-sufficiency of~~ individuals to pursue meaningful and valued lives, as defined by the individual, in the community~~with a mental disability.~~
- c) Agencies planning to develop and support community-integrated living arrangements shall do so pursuant to the Department licensure in accordance with this Part.
- d) Agencies providing CILA services must comply with applicable federal and State regulations and laws.

- ~~ed~~) Agencies ~~planning to provide~~providing CILA services to individuals with developmental disabilities who are included in the Department's Medicaid Home and Community-Based Services (HCBS) Waiver for Adults with Developmental Disabilities; ~~DD Adult Waiver (Medicaid DD Waiver) will comply with 59 Ill. Adm. Code 120.~~
- 1) Shall comply with Section 115.230 and 115.310 as well as 59 Ill. Adm. Code 120 and 42 CFR 441.301(c)(1) through (c)(4)(i) through (v), which specify Person-Centered Planning and Settings requirements for individuals enrolled in HCBS Waiver services.
 - 2) Shall not have the effect of isolating individuals receiving Medicaid HCBS Waiver services from the broader community of individuals not receiving Medicaid HCBS Waiver services as described in 42 CFR 441.301(c)(5)(v) and related federal CMS guidance.
 - 3) Shall meet the additional conditions set forth in 42 CFR 441.301(c)(4)(vi)(A) through (E) and Section 115.200 if the CILA is provider-owned or controlled.
 - 4) Shall have any modification of the additional conditions set forth under 42 CFR 441.301(c)(4)(vi)(A) through (D) supported by a specific assessed need, justified in the Personal Plan, and be documented in the Personal Plan as specified in 42 CFR 441.301(c)(4)(vi)(F)(1) through (8).
- f) CILA services for persons with developmental disabilities are funded through the rate methodology designated by DDD, as mandated by Section 9 of the Community-Integrated Living Arrangements Licensure and Certification Act [210 ILCS 135/9].
- g) Rates for all host family settings, as described in Subpart E, shall be determined by the Department through the CILA rate methodology. The Department may develop a version of the methodology specifically modified for host family settings.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.120 Definitions

For the purpose of this Part, the following terms are defined:

"Abuse." See definition found in 59 Ill. Adm. Code 50.10. ~~Any physical injury,~~

~~sexual abuse or mental injury inflicted on an individual other than by accidental means. (Section 1-101.1 of the Code)~~

~~"Accreditation." A process establishing that a program complies with nationally-recognized standards of care as set by one of the following:~~

~~1998 Hospital Accreditation Standards (Joint Commission on Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1998);~~

~~1997-1998 Standards for Behavioral Health Care (Joint Commission on Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996);~~

~~1996 Comprehensive Accreditation Manual for Health Care Networks (Joint Commission on Accreditation of Healthcare Organizations (JCAHO), One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, 1996);~~

~~Council on Accreditation-1997 Standards for Behavioral Health Care Services and Community Support and Education Services (Council on Accreditation of Services for Families and Children (COA), 120 Wall Street, 11th Floor, New York, New York 10005, 1996);~~

~~1997 Personal Outcome Measures (The Council, 100 West Road, Suite 406, Towson, Maryland 21204, 1997);~~

~~Behavioral Health Standards Manual (CARF, The Rehabilitation Commission, 4891 East Grant Road, Tucson, Arizona 85711, 1998);~~

~~Standards Manual and Interpretative Guidelines for Employment and Community Support Services (CARF, The Rehabilitation Commission, 4891 East Grant Road, Tucson, Arizona 85711, 1998); or~~

~~Education Standards (National Accreditation Council for Agencies Serving the Blind and Visually Handicapped, 15 West 65th Street, New York, New York, 10023, 1994).~~

~~"Agency." A community mental health or developmental services organization licensed by the Department which is a sole proprietorship, association, partnership, corporation or organization, public or private, either for profit or not for profit, that certifies community integrated living arrangements for individuals with a mental disability. (Section 3(b) of the Community Integrated Living~~

~~Arrangements Licensure and Certification Act)~~

~~"Agency supervision." Either continuous supervision or support or intermittent supervision or support as defined in this Section.~~

"Applicant." A person, group of persons, association, organization, partnership, or corporation that applies for a license to provide community-integrated living arrangement services under this Part.

~~"Array of services." A range of activities and interventions designed to provide treatment, habilitation, training, rehabilitation and other community integrative supports.~~

"Assigned Independent Receiver" or "Receiver." A court appointed qualified person, who assumes custodial responsibility for a CILA agency that is operating without a license or whose license has been suspended, revoked, or refused renewal. This person cannot be an owner or an affiliate of the CILA agency which is in receivership.

"Authorized CILA agency representative." The administrative head of a CILA ~~an~~ agency, or their designee, appointed by the CILA agency's governing body with overall responsibility for fiscal and programmatic management.

"Authorized electronic monitoring." The placement and use of an electronic monitoring device by an individual in their room in accordance with the Authorized Electronic Monitoring in Community-Integrated Living Arrangements and Developmental Disability Facilities Act [210 ILCS 165/5].

"Aversive procedures." The application, contingent on the exhibition of a specific behavior that is not adaptive, of unpleasant or painful stimuli, or stimuli that have a potentially noxious affect. Aversive procedures have the following characteristics:

Obvious signs of physical pain experienced by the individual.

Potential or actual physical side effects, including tissue damage, physical illness, severe stress, and/or death.

Dehumanization of the individual, through means such as social degradation, social isolation, verbal abuse, techniques inappropriate for the individual's age, and treatment out of proportion to the target behavior.

"BALC." The Department's Bureau of Accreditation, Licensure and Certification.

"BQM." The Bureau of Quality Management in the Department's Division of Developmental Disabilities.

"Certification." A status granted by the Department to a specific site whose~~An affirmation by an agency that~~ programs ~~operate~~operated under this Part, successfully meet ~~its~~the Part's standards, and provide services to promote community-integrated living.

"CILA agency" or "CILA provider." A developmental disability services agency that is licensed by the Department to provide community-integrated living arrangement services for individuals with a developmental disability. (Section 3(b) of the Community-Integrated Living Arrangements Licensure and Certification Act)

"CILA services." Residential supports that a CILA agency is paid to deliver to individuals with developmental disabilities that promote health, well-being, maximum independence, choice-making, access to the greater community to the same degree as individuals not receiving HCBS.

"Code." The Mental Health and Developmental Disabilities Code [405 ILCS 5].

"Coercion." Any action whereby an individual, guardian, or family member is compelled by force, intimidation, or threat to act, or refrain from action, in a manner contrary to how the individual would have acted if permitted to act in accordance with their free and informed choice.

"Community-integrated living arrangement (CILA)." A residential setting or site that is~~living arrangement~~ certified by ~~the Department~~an agency where eight or fewer individuals with a ~~developmental~~mental disability *reside* together in an apartment, house, or one or more units in a multi-unit building~~a home~~ *under the supervision of* ~~an~~the agency and are provided with an array of services. (Section 3(d) of the Community-Integrated Living Arrangements Licensure and Certification Act).

"Community integration" or "integration into the community." Individuals receiving Medicaid HCBS having opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS (42 CFR 441.301(c)(2)(i)). Examples of on-going engagement in community life for individuals with developmental disabilities include~~On-going participation in community life including at least the following:~~

~~Time~~The amount of time spent out of the ~~home~~living arrangement participating in ~~generic~~(non-disability ~~specific~~)~~related~~ activities chosen by the individual and guardian that are available to the greater community, such as spiritual and cultural interests, places of worship (e.g., church, temple, mosque, synagogue or other places of worship), recreational activities~~church, Y.M.C.A., Y.W.C.A.,~~ education, library, clubs, shopping and amusements.

Participation in~~family~~ activities,~~and~~ celebrations, (e.g., such as holidays, birthdays, reunions)~~;~~ communication (wireless, electronic, and/ortelephone ~~and~~ mail) and vacations.

"Confidentiality Act." The Mental Health and Developmental Disabilities Confidentiality Act [740 ILCS 110].

~~"Consumer representatives." Persons chosen by individuals and representing the interests of individuals served by an agency such as family members, guardians and advocates.~~

"Continuous supervision or support." Direction or assistance provided to an individual under the auspices of the licensed CILA agency (i.e., not an Intermittent CILA). An employee or any other person compensated or in a volunteer capacity, but not the guardian of the individual, with responsibility for care of individuals served from the licensed CILA agency, or another agency through which any portion of CILA services is being provided, must be physically present on-site all hours individuals are present, unless otherwise specified in an individual's Personal Plan and provided for in their Implementation Strategy. Continuous supervision or support may range from being in immediate line of sight to the individual receiving services, to present and accessible to the individual receiving services, depending on the individual's Implementation Strategy~~services plan~~.

"Critical Incidents." Any alleged, suspected, or actual occurrence of an incident when there is reason to believe the health or safety of an individual may be adversely affected or an individual may be placed at a reasonable risk of harm. Critical incidents for this Part shall include abuse, neglect, and financial exploitation as defined in 59 Ill. Adm. Code 50. Critical Incidents shall also include deaths not otherwise reportable pursuant to 59 Ill. Adm. Code 50, injuries of known or unknown origin, medical emergencies, unscheduled hospitalizations, missing individuals, peer-to-peer or peer-to-staff acts of aggression, and involvement of law enforcement and/or fire department.

"Day." A calendar day, unless otherwise indicated.

~~"Deemed status." If an agency has been accredited by an approved accrediting body as identified in the definition of "accreditation" in this Section, the Department shall deem the agency to be in substantial compliance with specific Sections of this Part. Deemed status, however, may be nullified by a finding by the Department that the agency is in substantial non-compliance with one or more of the designated Sections.~~

"Department" or "DHS." The Illinois Department of Human Services.

"Developmental disability." An intellectual disability or other severe, chronic disability, other than mental illness, found to be closely related to an intellectual disability because this condition results in impairment of general intellectual functioning or adaptive behavior similar to that of persons with ID, and requires services similar to those required for a person with an intellectual disability. In addition, a developmental disability:

is manifested before the individual reaches 22 years of age;

is likely to continue indefinitely;

results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, or economic self-sufficiency; and

reflects the individual's need for a combination and sequence of special interdisciplinary or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated (modified from the American Association on Intellectual and Developmental Disabilities, Intellectual Disability: Definition, Diagnosis, Classification, and Systems of Supports, 12th Edition (2021)).~~A disability which is attributable to mental retardation, cerebral palsy, epilepsy or autism; or to any other condition which results in an impairment similar to that caused by mental retardation and which requires services similar to those required by individuals with mental retardation. Such disability must originate before the age of 18, be expected to continue indefinitely, and constitute a substantial handicap. (Section 1-106 of the Code)~~

~~"Department." The Department of Human Services.~~

"Diagnosis." A category of disability stated in accordance with the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V) or the most recently published version (800 Maine Avenue, S.W., Suite 900, Washington, DC 20024 ~~either the Classification in Mental Retardation, 10th Edition (American Association on Mental Retardation, 444 Capitol Street NW, Suite 846, Washington, D.C. 2001-1512 (2002)), or the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IVTR) (American Psychiatric Association, 1000 Wilson Boulevard, Suite 1825, Arlington VA 22209-3901 (2013/2000)).~~

"Direct Support Professional" or "DSP". Any person who provides habilitative care, services, or support to individuals with developmental disabilities and is listed on the Department's Health Care Worker Registry as a trained DSP or DDD Aide under its Program section. DSPs shall be trained in accordance with this Part and function under the supervision of a Qualified Intellectual Disabilities Professional (QIDP), a Licensed/Registered Nurse, or other higher-level employee authorized by the CILA agency.

"Division of Developmental Disabilities," "Division," or "DDD." The Department's Division of Developmental Disabilities. ~~"Economic self-sufficiency." The managing of financial resources which are needed to satisfy the daily needs of an individual including at least involvement in commerce, such as managing money, comparative shopping, selecting clothes, informed selection of foods, diet and purchasing and negotiating.~~

"Electronic monitoring device." *A surveillance instrument with a fixed position video camera or an audio recording device, or a combination thereof, that is installed in an individual's bedroom under the provisions of the Authorized Electronic Monitoring in Community-Integrated Living Arrangements and Developmental Disability Facilities Act and broadcasts or records activity or sounds occurring in the room [210 ILCS 165/5].*

"Employee." For the purposes of this Part, any individual hired, employed, or retained by a CILA agency, whether paid or on an unpaid basis ~~Any person on the agency payroll.~~

"Entitlements." Government-related financial benefits available to individuals who qualify on the basis of need, disability and/or income, such as Title XVIII (Medicare) (42 U.S.C. ~~USCA~~ 1395b-1 (1996)), Title XIX (Medicaid) (42 U.S.C. ~~USCA~~ 1396a (1996)) and Veteran's Administration benefits (38 U.S.C. ~~USCA~~ 521, 541, 542 (1996)).

~~"Equivalency." Evidence to substantiate compliance with requirements of this~~

~~Part by other means than indicated in this Part.~~

“Exploitation” or “Financial Exploitation.” See definition of financial exploitation found in 59 Ill. Adm. Code 50.10.

"Governing body." The policy-making authority of ~~a CILA~~^a agency that establishes policies concerning the CILA agency's operation and the welfare of individuals; provides for the CILA agency's administration by appointing an authorized CILA agency representative to implement its policies; and exercises general oversight of the CILA agency's operation, its fiscal affairs and programmatic content to implement the organization's mission.

"Guardian." The plenary or limited guardian or conservator of the individual appointed by the court for an individual over age 18 (~~when so long as~~ the limited guardian's duties encompass concerns related to service requirements), or the natural or adoptive parent of a minor, or a person acting as a parent of a minor. All references in this Part to an "individual and/or guardian" include the guardian only if applicable.

"Habilitation." Individually tailored supports that assist individual with developmental disabilities with the acquisition, retention, or improvement in skills related to living in the community. Services are developed in accordance with the needs of the individual and include supports to foster independence and encourage development of a full life in the community, based upon what is important to and for the individual, as documented in their Person-Centered Plan. This includes assisting and teaching individuals to attain new and maintain and improve existing skills in areas of self-care, daily living, adaptive skills, leisure, and community integration, including building and maintaining relationships. ~~An effort directed toward the alleviation of a developmental disability or toward increasing the level of physical, mental, social or economic functioning of an individual with a developmental disability.~~ Additionally, it may include efforts to prevent regression or decelerate loss of function. *Habilitation may include, but is not limited to, diagnosis, evaluation, medical services, residential care, day care, special living arrangements, training, education, employment related services, protective services, counseling, and other services provided to individuals with a developmental disability by developmental disabilities programs.* (Section 1-111 of the Code)

"Host family." ~~One A residential setting that consists of one~~ or more persons unrelated to the individual with developmental disabilities, employed by or contracting with the CILA~~provider~~ agency, who reside with the individual.

“Host family living arrangement” or “Host family setting”. A 24-hour residential

setting, serving as an alternative to a typical shift staff arrangement. The setting is the residence for the person with a developmental disability and the host family.

"Host family living arrangement – traditional care model." A 24-hour residential alternative to a typical shift staff arrangement. The setting is the residence for the person with a developmental disability and the full-time residence for the paid host family~~caregivers~~. It is owned, leased, or rented by the paid host family~~caregivers~~. In these settings, host families consist of one or more persons who are unrelated to the individual with a developmental disability, and who contract with the CILA~~provider~~ agency.

"Host family living arrangement – shared living model." A 24-hour residential alternative to a typical shift staff arrangement. The setting is the residence for the person with a developmental disability and may house either full or part-time paid host family~~caregivers~~ in which more than 50 percent of the residential coverage is provided by individuals other than shift staff employees. It is owned, leased, or rented by the individuals, host family~~caregivers~~, or CILA agency. In these settings, host families consist of one or more persons who are unrelated to the individual with a developmental disability, and who are employed by or contract with the CILA~~provider~~ agency. The difference between traditional care and shared living models is shift employees routinely share supervision, care, and training responsibilities with the host family~~caregivers~~ in the shared living model.

"Imminent risk." A preliminary determination of immediate, threatened, or impending risk of illness, mental injury, or physical injury to an individual as would cause a reasonably prudent person to take immediate action and that is not immediately corrected, such as environmental or safety hazards.

"Implementation Strategy." A document developed by the licensed CILA agency in conjunction with the individual or the individual's guardian that describes and directs the activities and methods used to provide services and supports for the areas of an individual's Personal Plan for which the CILA agency has agreed to be responsible. The priorities, strengths, support needs, and risk factors identified in the Personal Plan must be addressed and accounted for in the Implementation Strategy for those areas of the CILA agency's responsibility. The document must describe how the CILA agency will support the person to pursue the outcomes included in the Personal Plan and be signed by the person, guardian, and ISC.

~~"Independence in daily living." Demonstrated ability of an individual to provide for his or her own basic care without outside assistance such as:~~

~~Vocational development outside the living arrangement that enables individuals to participate in the workforce such as using on-the-job skills,~~

~~riding a bus and crossing streets.~~

~~Personal care, i.e., maintaining own hygiene, personal space and social relationships.~~

~~Participation in citizenship activities such as awareness of community norms, voting and volunteering in community projects.~~

"Independent Monitor" or "Monitor." An individual, employee, contractor, or any other person compensated or in a volunteer capacity with a business entity who has been assigned by the Department to oversee the business affairs of a CILA when any of the following situations occur:

The CILA agency is operating without a license;

The Department has suspended, revoked, or refused to renew the existing license of the CILA agency;

The Department has issued a notice to terminate or not renew its agreement with the CILA agency;

The CILA agency is closing or has informed the Department that it intends to close and adequate arrangements for transition of individuals have not been made at least 30 days prior to closure;

The Department determines that an emergency (a threat to the health, safety, or welfare of individuals that the CILA agency is unwilling or unable to remedy) exists; or

The Department, with the Department of Healthcare and Family Services, terminates the CILA provider's participation in the federal reimbursement program under Title XIX (Medicaid) of the Social Security Act (42 U.S.C 7).

The monitor cannot be Department or State agency staff. The monitor shall observe operation of the facility, assist the facility by advising it on how to comply with the State regulations, and shall report periodically to the Department on the operation of the facility.

"Independent Service Coordination agency" or "ISC". A contracted entity designated by DDD to carry out certain federal and State requirements related to assessment, determination of eligibility and service coordination for individuals with a developmental disability. This entity provides conflict of interest free case

management, including development and monitoring of an individual's Personal Plan, to DDD Medicaid HCBS Waiver participants. They also serve as the front line for information and assistance to help individuals and families navigate the system, ensure informed choice, link individuals to services and address problems related to outcomes and quality.

"Individual" or "individuals." A person or persons who receives or receive community-integrated living arrangement services.

"Individual representatives." Persons chosen by individuals and representing the interests of individuals served by a CILA agency such as family members, guardians, and advocates.

"Individually owned or controlled." A physical setting in which the individual resides that is owned, co-owned, leased, or rented by the individual. This setting is not provider-owned or controlled.

~~"Individual integrated services plan" or "services plan." A written plan that includes an assessment of the individual's strengths and needs, a description of the array of services needed regardless of availability, objectives for each service, the role of the individual or guardian, significant others and family in the development and implementation of the plan when indicated, an anticipated timetable for the accomplishment of objectives, and the name of the person or persons responsible for the implementation of the plan.~~

"Informed consent." Permission freely granted by the individual or guardian based on full disclosure to the individual or guardian of the benefits and/or liabilities of participation in specific procedures and/or services, including releases of information, as part of the individual's Personal Plan and Implementation Strategy~~services plan.~~

~~"Interdisciplinary process." A set of steps or systems initiated to assess the strengths and needs of an individual with a mental disability with input from the individual requesting and/or receiving services and from the disciplines providing or targeted to provide services in order to collaboratively develop and implement an individual integrated services plan, and to review and/or update the plan. Persons participating in the process shall include, at a minimum, the individual and his or her legal guardian, the individual's family, unless a legally competent individual chooses not to have the family involved or the family refuses to be involved, a qualified mental retardation professional or qualified mental health professional and other members of the community support team.~~

"Intellectual Disability." A disorder with onset during the developmental period (before the individual reaches age 22), that includes both intellectual and adaptive deficits in conceptual, social, and practical domains. The following criteria must be met:

deficits in intellectual functions such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience confirmed by both clinical assessment and individualized, standardized intelligence testing (generally indicated with an IQ score of about 70 or below);

deficits in adaptive functioning that result in failure to meet developmental and sociocultural standards for personal independence and social responsibility. Without ongoing support, the adaptive deficits limit functioning in one or more activities of daily life, such as communication, social participation, and independent living, across multiple environments, such as home, school, work, and community; and

onset of intellectual and adaptive deficits during the developmental period.

(Modified from the American Psychiatric Association (2013), Diagnostic and statistical manual of mental disorders (5th ed.) and the American Association on Intellectual and Developmental Disabilities, Intellectual Disability: Definition, Diagnosis, Classification, and Systems of Supports, 12th Edition (2021)).

"Intermittent supervision or support." Supervision or support provided to an individual under the auspices of a licensed CILA agency less than 24-hours per day (i.e., not a 24 hour or host family CILA). When employees are not on-site, supervision or support shall be provided by means of 24-hour on-call availability and by a variety of alternatives or supports, such as natural and remote supports~~non-disabled roommates, paid neighbors, non-paid family members and other formal or informal arrangements.~~

~~"Linkage." Person-to-person contact to assure that the supports and services needed by the individual and specified in the individual integrated services plan are obtained or regularly made accessible and available to an individual who chooses to not use them initially. The qualified mental retardation professional or mental health professional under the supervision of the qualified mental health professional shall be responsible for assuring linkage.~~

~~"Living arrangement." An apartment, house or one or more units in a multi-unit dwelling where an individual has chosen to live or where the individual's guardian~~

has chosen for him or her to live.

~~"Mental disability" or "mentally disabled." A developmental disability, a mental illness, or both.~~

"Mental health professional" or "MHP(MHP)." See definition of mental health professional found in 89 Ill. Adm. Code 140.453~~A mental health professional who provides services under the supervision of a qualified mental health professional, as defined below, in providing services specified in Subpart B of this Part to an individual and his or her family, as necessary. The mental health professional must possess a bachelor's degree in social work, sociology, psychology, counseling, rehabilitation, or art and recreation therapy or possess a practical nurse license pursuant to the Nursing and Advanced Practice Nursing Act [225 ILCS 65] or have a minimum of five years of supervised experience in a mental health service.~~

"Mental illness." For purposes of this Part, mental illness refers to the target population of adults with serious mental illness (SMI), as established by the Department's ~~Division~~Office of Mental Health ~~and defined~~ as follows:

Individuals with serious mental illness are adults whose emotional or behavioral functioning is so impaired as to interfere with their capacity to remain in the community without supportive treatment. The mental impairment is severe and persistent and may result in a limitation of their capacities for primary activities of daily living, interpersonal relationships, homemaking, self-care, employment, or recreation. This impairment may limit their ability to seek or receive local, State, or federal assistance such as housing, medical and dental care, rehabilitation services, income ~~and food~~ assistance ~~and food stamps~~, or protective services.

The individual must have one of the following diagnoses that meets ~~DSM-5~~DSM-IV criteria and that is the focus of the treatment being provided:

Delusional Disorder (F22)

Brief Psychotic Disorder (F23)

Schizophreniform Disorder (F20.81)

Schizophrenia (F20.9)

Schizoaffective Disorder (F25.x)

688	<u>Catatonia Associated with another Mental Disorder (Catatonia</u>
689	<u>Specifier) (F06.1)</u>
690	
691	<u>Other Specified Schizophrenia Spectrum and Other Psychotic</u>
692	<u>Disorder (F28)</u>
693	
694	<u>Unspecified Schizophrenia Spectrum and Other Psychotic Disorder</u>
695	<u>(F29)</u>
696	
697	<u>Bipolar I Disorder (F31.xx)</u>
698	
699	<u>Bipolar II Disorder (F31.81)</u>
700	
701	<u>Cyclothymic Disorder (F34.0)</u>
702	
703	<u>Unspecified Bipolar and Related Disorder (F31.9)</u>
704	
705	<u>Disruptive Mood Dysregulation Disorder (F34.8)</u>
706	
707	<u>Major Depressive Disorder Single episode (F32.xx)</u>
708	
709	<u>Major Depressive Disorder, Recurrent episode (F33.xx)</u>
710	
711	<u>Obsessive-Compulsive Disorder (F42)</u>
712	
713	<u>Posttraumatic Stress Disorder (F43.10)</u>
714	
715	<u>Anorexia Nervosa (F50.0x)</u>
716	
717	<u>Bulimia Nervosa (F50.2)</u>
718	
719	<u>Postpartum Depression (F53.0)</u>
720	
721	<u>Puerperal Psychosis (F53.1)</u>
722	
723	<u>Factitious Disorder Imposed on another (F68.A)</u>
724	
725	Schizophrenia (295.xx)
726	
727	Schizophreniform disorder (295.4)
728	
729	Schizo-affective disorder (295.7)
730	

~~Delusional disorder (297.1)~~

~~Shared psychotic disorder (297.3)~~

~~Brief psychotic disorder (298.8)~~

~~Psychotic disorder NOS (298.9)~~

~~Bipolar disorders (296.0x, 296.4x, 296.5x, 296.6x, 296.7, 296.80, 296.89, 296.90)~~

~~Cyclothymic disorder (301.13)~~

~~Major depression (296.2x, 296.3x)~~

~~Obsessive-compulsive disorder (300.30)~~

~~Anorexia nervosa (307.1)~~

~~Bulimia nervosa (307.51)~~

And the individual must meet the criteria for either treatment history or functional criteria as follows:

Treatment history. ~~(Treatment history~~ covers the ~~individual's~~ ~~client's~~ lifetime treatment and is restricted to treatment for the ~~DSM-IV~~ ~~DSM-~~ ~~IV~~ diagnosis specified in this definition.) To qualify under treatment history, the individual must meet at least one of the following criteria:

Continuous treatment of six months or more, including treatment during adolescence, in one, or a combination of, the following modalities: inpatient treatment, day treatment or partial hospitalization;

Six months continuous residence in residential programming (e.g., long-term care facility or assisted, supported, or supervised residential programs);

Two or more admissions of any duration to inpatient treatment, day treatment, partial hospitalization, or residential programming within a 12-month period;

A history of using psychotropic medication management, case

management, or outreach and engagement services ~~the following~~
~~outpatient services~~ over a one-year period, either continuously or
intermittently; ~~psychotropic medication management, case~~
~~management, outreach and engagement services~~; or

Previous treatment in an outpatient modality, and a history of at
least one mental health psychiatric hospitalization.

Functional criteria: ~~(Functional criteria~~ have been purposely narrowed
to descriptors of the most serious levels of functional impairment and
are not intended to reflect the full range of possible impairment.) To
qualify under functional criteria, the individual must meet at least two
of the following conditions. ~~The individual:~~

Has a serious impairment in social, occupational, or school
functioning;

Is unemployed or working only part-time due to mental illness and
not for reasons of physical disability or some other role
responsibility (e.g., student or primary caregiver for dependent
family member); is employed in a sheltered setting or supportive
work situation; or has markedly limited work skills;

Requires help to seek public financial assistance for out-of-hospital
maintenance (e.g., Medicaid, SSI, other indicators);

Does not seek appropriate supportive community services, e.g.,
recreational, educational, or vocational support services, without
assistance;

Lacks supportive social systems in the community (e.g., no
intimate or confiding relationship with anyone in ~~their~~ ~~his or her~~
personal life, no close friends or group affiliations, is highly
transient or has inability to co-exist within a family setting);

Requires assistance in basic life and survival skills (e.g., must be
reminded to take medication, must have transportation to mental
health clinic and other supportive services, needs assistance in self-
care, household management, food preparation or money
management, ~~etc.~~, is homeless or at risk of becoming homeless); or

Exhibits inappropriate or dangerous social behavior that results in
demand for intervention by the mental health and/or judicial/legal

system.

If the individual does not currently meet the functional criteria ~~listed above~~, but is currently receiving treatment and has a history within the past five years of functional impairment meeting two of the functional criteria ~~listed above~~ that persisted for at least 12 months, and there is documentation supporting the professional judgment that regression in functional impairment would occur without continuing treatment, then the individual will be determined to have met the functional criteria.

~~"Mental retardation." The essential feature of mental retardation is significantly subaverage general intellectual functioning that is accompanied by significant limitations in adaptive functioning in at least two of the following skill areas: communication, self-care, home living, social/interpersonal skills, work, leisure, health, and safety. The onset must occur before age 18 years. (See DSM-IV.)~~

~~"Moral turpitude." Moral quality of being inherently base, depraved, vile or wicked.~~

"Natural environment." A setting where an individual not receiving HCBS typically spends time, including home, work, places of worship, community centers, libraries, parks, recreation centers, educational settings, or other public buildings. These sites are not licensed, certified, accredited or identified as a provider~~Locations and settings where an individual lives, works and socializes and carries out activities of daily living.~~

"Natural supports." Unpaid assistance provided to an individual with a developmental disability typically by a person who has some type of friendship, kinship or other relationship (co-worker, member of the same social group) with the individual, whom the individual accepts into their~~his or her~~ life and with whom the individual has chosen to spend ~~time. A natural support includes an informal agreement to assist in a particular way for~~ some duration of time and~~(i.e.,~~ not just a single~~one-time~~ action done out of courtesy).

"Neglect." See definition found in 59 Ill. Adm. Code 50.10~~The failure to provide adequate medical or personal care or maintenance, which failure results in physical or mental injury to an individual or in the deterioration of an individual's physical or mental condition.~~

"Notice of deficiency~~violation~~." A report submitted to a CILA~~an~~ agency by the Department~~the Bureau of Accreditation, Licensure and Certification (BALC)~~ listing the CILA agency's deficiencies with this Part noted during a survey.

~~"OCAPS." The Department's Office of Clinical, Administrative and Program Support (OCAPS); Bureau of Accreditation, Licensure and Certification (BALC).~~

~~"Paraprofessional." An employee or contractual worker not designated as a professional by virtue of license, certification, or education, and who assists a professional.~~

"Personal Plan." A written document developed by an ISC agency in conjunction with the individual and guardian as well as family members, providers of services and others (e.g., friends or individual's representatives) as chosen by the individual and guardian that includes an assessment of the individual's strengths, preferences, needs, and desired outcomes. The document contains the outcomes that the individual requires in their life, describes what is important to the individual regarding delivery of services in a manner which ensures both personal preferences and health and welfare, including risk factors and means to minimize them. It includes the services that are to be furnished to the individual, the amount and frequency of each service, and the type of provider to furnish each service.

"Plan of correction." A written plan submitted by a CILA agency~~an agency~~ to the Department~~the Bureau of Accreditation, Licensure and Certification (BALC),~~ in response to a notice of deficiency~~violation~~, that describes the steps the CILA agency will take in order to bring a program or services into compliance, and the time-frames for completion of each step.

~~"Pre-admission screening (PAS) agent." Contracted community agency acting as a Department agent to provide comprehensive documentation for Illinois' pre-admission screening system and to incorporate the requirements imposed by the Centers for Medicare and Medicaid Services (CMS) to support reimbursement claims under Title XIX of the Social Security Act (42 USCA 1396 (1996)).~~

"Professional." An employee,~~or~~ contractual worker, or any other person, compensated or in a volunteer capacity designated as a professional by virtue of license, certification, or education. For the purpose of this part, Direct Support Professionals are not included in this definition.

~~"Progress notes." Narrative documentation in an individual's record of service provision and its relationship to the individual integrated services plan.~~

"Provider." See definition of "CILA agency."

"Provider-owned or controlled." A physical setting in which the individual resides that is:

owned, co-owned, leased or rented by an agency that provides Home and Community-Based Services; or

owned, co-owned, leased or rented by a third party that has a direct or indirect financial relationship with an agency that provides Home and Community-Based Services.

"Provider Support Team." A team consisting of the QIDP and a DSP; a nurse, or other professional staff (such as occupational therapist or speech therapist) when necessary, and other staff as consistent with the individual's Personal Plan and Implementation Strategy, all of whom directly serve the individual.

"Psychotropics." Drugs used for antipsychotic, antidepressant, antimanic and/or antianxiety purposes as listed in the American Hospital Formulary Services (AHFS) Drug Information Manual (American Society of Health-System Pharmacists, 7272 Wisconsin Avenue, Bethesda MD 20814 (2018~~2002~~)) (AGENCY NOTE: This document is published annually and updated quarterly.); the Physician's Desk Reference (PDR) (Medical Economics Company, Five Paragon Drive, Montvale NJ 07645-1742 (2017~~2002~~)) (AGENCY NOTE: This document is published annually.); and the Drug Facts and Comparisons (Facts and Comparisons, 111 West Port Plaza, Suite 300, St. Louis MO 63146-3098 (2017~~2002~~)) (AGENCY NOTE: This document is published annually and updated monthly.).

"Qualified Intellectual Disabilities Professional" or "QIDP". A QIDP must have at least one year of experience working directly with individuals with intellectual disabilities or other developmental disabilities and be one of the following (42 CFR 483.430):

a Doctor of Medicine or osteopathy licensed pursuant to the Medical Practice Act of 1987 [225 ILCS 60];

a registered professional nurse licensed pursuant to the Nurse Practice Act [225 ILCS 65];

an occupational therapist or occupational therapist assistant certified by the American Occupational Therapy Association or other comparable body pursuant to the Illinois Occupational Therapy Practice Act [225 ILCS 75];

a physical therapist certified by the American Physical Therapy Association or other comparable body pursuant to the Illinois Physical Therapy Act [225 ILCS 90];

a physical therapist assistant registered by the American Physical Therapy Association or a graduate of a two-year college-level program approved by the American Physical Therapy Association or comparable body;

a psychologist with at least a master's degree in psychology from an accredited school pursuant to the Clinical Psychologist Licensing Act [225 ILCS 15];

a social worker with a bachelor's degree from a college or university or graduate degree from a school of social work accredited or approved by the Council on Social Work Education or another comparable body, pursuant to the Clinical Social Work and Social Work Practice Act [225 ILCS 20];

a speech-language pathologist or audiologist with a certificate of Clinical Competence in Speech-Language Pathology or Audiology granted by the American Speech Language Hearing Association or comparable body or meeting the education requirements for licensure and being in the process of accumulating the supervised experience required for licensure pursuant to the Illinois Speech-Language Pathology and Audiology Practice Act [225 ILCS 110];

a professional recreation staff person with a bachelor's degree in recreation or in a specialty area such as art, dance, music, or physical therapy;

a professional dietitian registered by the American Dietetic Association;
or

a human services professional with a bachelor's degree in a human services field, including but not limited to sociology, special education, rehabilitation counseling and psychology.

~~"Qualified mental health professional (QMHP)." One of the following:~~

~~A physician licensed under the Medical Practice Act of 1987 [225 ILCS 60] to practice medicine or osteopathy with training in mental health services or one year of clinical experience, under supervision, in treating problems related to mental illness, or specialized training in the treatment of children and adolescents;~~

~~A psychiatrist (a physician licensed under the Medical Practice Act of 1987) who has successfully completed a training program in psychiatry approved by the American Medical Association or the American Osteopathic Association or other training program identified as equivalent by the Department;~~

~~A psychologist licensed under the Clinical Psychologist Licensing Act [225 ILCS 15] with specialized training in mental health services;~~

~~A social worker possessing a master's or doctoral degree in social work and licensed under the Clinical Social Work and Social Work Practice Act [225 ILCS 20] with specialized training in mental health services;~~

~~A registered nurse licensed under the Nursing and Advanced Practice Nursing Act [225 ILCS 65] with at least one year of clinical experience in a mental health service or a master's degree in psychiatric nursing;~~

~~An occupational therapist registered pursuant to the Illinois Occupational Therapy Practice Act [225 ILCS 75] with at least one year of clinical experience in a mental health setting;~~

~~An individual with a master's degree and at least one year of clinical experience in mental health services and who holds a license to practice marriage and family therapy pursuant to the Marriage and Family Therapy Licensing Act [225 ILCS 55]; or~~

~~An individual possessing a master's or doctoral degree in counseling and guidance, rehabilitation counseling, social work, vocational counseling, psychology, pastoral counseling or family therapy, or related field, who has successfully completed a practicum and/or internship that includes a minimum of 1,000 hours, or who has one year of clinical experience under the supervision of a qualified mental health professional or who is a licensed social worker holding a master's degree with two years of experience in mental health services, or who is a permanently licensed professional counselor under the Professional Counselor and Clinical Professional Counselor Licensing Act [225 ILCS 107] holding a master's degree with one year of experience in mental health services.~~

~~"Qualified mental retardation professional (QMRP)." A QMRP must:~~

~~Have at least one year of experience working directly with individuals with mental retardation or other developmental disabilities and be one of~~

the following:

~~A doctor of medicine or osteopathy licensed pursuant to the Medical Practice Act of 1987;~~

~~A registered nurse licensed pursuant to the Nursing and Advanced Practice Nursing Act;~~

~~An occupational therapist or occupational therapist assistant certified by the American Occupational Therapy Association or other comparable body (Illinois Occupational Therapy Practice Act);~~

~~A physical therapist certified by the American Physical Therapy Association or other comparable body (Illinois Physical Therapy Act [225 ILCS 90]);~~

~~A physical therapist assistant registered by the American Physical Therapy Association or a graduate of a two-year college-level program approved by the American Physical Therapy Association or comparable body;~~

~~A psychologist with at least a master's degree in psychology from an accredited school (Clinical Psychologist Licensing Act);~~

~~A social worker with a bachelor's degree from a college or university or graduate degree from a school of social work accredited or approved by the Council on Social Work Education or another comparable body (the Clinical Social Work and Social Work Practice Act);~~

~~A speech language pathologist or audiologist with a certificate of Clinical Competence in Speech Language Pathology or Audiology granted by the American Speech Language Hearing Association or comparable body or meeting the education requirements for licensure and being in the process of accumulating the supervised experience required for licensure (the Illinois Speech Language Pathology and Audiology Practice Act [225 ILCS 110]);~~

~~A professional recreation staff person with a bachelor's degree in recreation or in a specialty area such as art, dance, music or physical therapy;~~

~~A professional dietician registered by the American Dietetics Association;~~

~~A human services professional with a bachelor's degree in a human services field, including but not limited to sociology, special education, rehabilitation counseling and psychology.~~

"Quality assurance." A systematic and objective approach to monitoring and evaluating the appropriateness, adequacy and quality of services and supports that enable individuals with a ~~mental illness or~~ developmental disability to achieve defined outcomes in their lives.

"Quality assurance review." A BQM process to determine the degree of compliance with quality assurance requirements in this Part that a CILA agency has maintained. This can include reviewer observation and an on-site, desk audit, remote or virtual form of examination of the following: policies, procedures, records of individuals, written Personal Plan and Implementation Strategies. Reviewers shall use an instrument containing national indicators to interview individuals and employees. Observation of a sample of individuals, drawn from across CILA sites statewide, is also a part of the review.

"Relative." Spouse, parent, stepparent, son, daughter, brother, sister, stepbrother, stepsister, half-brother, half-sister, uncle, aunt, niece, nephew, first cousin, or any such person denoted by the prefix "grand" or "great" or the spouse of any of the persons specified in this definition.

"Relief." A paid service for caregivers that provides support to individuals with developmental disabilities in host family living arrangements. Relief services enable the caregivers to have free time apart from the individuals with developmental disabilities.

"Remote Monitoring and Supports." The use of electronic interactive technology (e.g., a device, a product, or system) to provide supports and services, absent of direct care staff, in accordance with the Health Care Affordability Act [305 ILCS 5/12-21.21]. Remote monitoring and supports are meant to increase independence and daily living skills of individuals.

"Residence." See "living arrangement."

"Respite." Services provided to individuals who are unable to care for themselves, furnished on a short-term basis due to the absence of or need for relief of those persons normally providing care.

"Restraint." *The direct restriction through mechanical means or personal physical force of the limbs, head, or body of an individual except as part of a medically prescribed procedure for the treatment of an existing physical disorder or the amelioration of a physical disability. The partial or total immobilization of an individual for the purpose of performing a medical or surgical procedure shall not constitute restraint. Momentary periods of physical restriction by direct person-to-person contact, without the aid of material or mechanical devices, accomplished with limited force, and that are designed to prevent an individual from completing an act that would result in potential physical harm to the individual or another shall not constitute restraint, but shall be documented in the individual's record. [405 ILCS 5/1-125]*

"Seclusion." *Sequestration by placement of an individual alone in a room from which he or she has no means of leaving; seclusion is prohibited. ~~When an individual is placed in a behavior modification program pursuant to his or her integrated services plan, he or she may be removed from a situation that affords positive reinforcement to an area where reinforcement is not available for a reasonable period of time not to exceed 30 minutes and such restrictions shall not constitute seclusion. (Section 1-126 of the Code)~~*

"Secretary." The Secretary of the Department or ~~their~~his or her designee.

"Self-administration of medications." An ~~individual~~individual's ~~with a developmental disability's~~ ability to correctly take prescribed medications independently or ~~with prompts when the individual has a mental illness or, if the individual has a developmental disability,~~ has been assessed and determined to be ~~independent at Level 4 with the Department approved self-administration of medication tool,~~ in accordance with 59 Ill. Adm. Code 116.

~~"Site." Any living arrangement under one continuous roof in which individuals receiving CILA services live.~~

~~"Skills training." Activities that focus on the development of daily living skills that enable individuals to achieve optimal independent functioning and economic self-sufficiency.~~

"Substantial compliance." An evaluation result that determines that a surveyed program meets the requirements set forth in this Part sufficiently to be at a Level 1 ~~or, 2 or 3,~~ as described in Section 115.440, and in good standing.

"Support Services Team" or "SST". Contracted entities that provide an interdisciplinary technical assistance and training response to persons with a developmental disability in a medical or behavioral situation that challenges their

ability to live and thrive in the community.

"Survey" or "licensure and certification survey." A process to determine the degree of compliance with this Part that a CILA agency has maintained. This includes surveyor observation and an on-site, desk audit, remote, or virtual examination of the following: policies, procedures, records of individuals, written Personal Plan and Implementation Strategies plans, and the physical plant. Interviews of individuals and employees and observation of a sample of CILA sites are also a part of the survey.

"Tardive dyskinesia." An abnormal involuntary movement disorder associated with the long-term use of antipsychotic medications. It may be persistent or transient and is characterized by a variable mixture of facial, ocular, oral, lingual, truncal or limb movements.

"Time-out." Contingent removal from a situation in which reinforcement occurs into a situation from which reinforcement does not occur, for a reasonable period of time; time-out is prohibited ~~not to exceed 30 minutes~~.

"Treatment." *An effort to accomplish an improvement in the mental condition or related behavior of an individual. Treatment includes, but is not limited to, hospitalization, partial hospitalization, outpatient services, examination, diagnosis, evaluation, care, training, psychotherapy, pharmaceuticals, and other services provided for individuals by mental health agencies or psychiatric hospitals.* (Section 1-128 of the Code)

"Volunteer." An unpaid person whose activities (e.g., helping with yardwork, assisting in recreational activities, teaching a cooking or yoga class) are organized and supervised by the CILA agency to supplement the services the CILA agency provides or other activities designated by the CILA agency.

"Waiver." An action by the Department in which exceptions to this Part are granted on application by a CILA agency for a period not to exceed the duration of the current license. Waivers may be granted only for that which is allowable under this Part.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.130 Rate Components

The components of Department reimbursement for CILA services for persons with developmental disabilities may include, but shall not be limited to, the following, using costs as

reported on the Consolidated Financial Report, or its successor, and other sources as deemed appropriate by the Department:

a) Base support costs may include allowances for "room and board", "program", "transportation", and "administration". Base support costs are considered to be those that are incurred in the delivery of CILA supports to individuals with developmental disabilities for the purchase of services that are common to all individuals receiving CILA services.

1) Room and board cost centers
The "room and board" allowance includes costs incurred in keeping a home in normal operation. Cost centers under the room and board major allowance category may include:

- A) Housing;
- B) Utilities;
- C) Telecommunications;
- D) Building and Property Insurance;
- E) Maintenance and Housekeeping;
- F) Food Supplies;
- G) Nonfood Supplies; and
- H) Other, not elsewhere classified.

2) Program cost centers
The program allowance includes costs incurred in providing habilitation services and supports to the extent allowed by the CILA rate model. Cost centers under the program major category may include:

- A) Direct care staff and supervision;
- B) Fringe benefits;
- C) Other supplies;
- D) Miscellaneous consultant services;

E) Program support cost; and

F) Occupancy factor.

3) Transportation

Transportation cost may be incurred while CILA providers assist and/or train the persons living in the CILA home in the activities of daily living.

4) Administration

All administrative costs associated with CILA agency overhead expenses as they relate to the delivery of CILA services are included within the "administration" cost center reimbursement. CILA agency overhead is assumed to include all the costs associated with administrative staff, administrative clerical staff, office space costs, office operating expenses, insurance, management consultants, accounting, the cost of hiring staff, staff physical examinations, staff travel and training, conferences, conventions, association fees, and all other costs incurred in the overhead associated with the delivery of CILA services.

b) Non-base support costs are expenses incurred due to the special added services required by specific persons living in CILAs to the extent allowed by the CILA rate model. Non-base supports can include other individually required supports such as additional staffing, nursing, special dietary needs, and therapies. Non-base support awarded as billable supports or additions to the rate generated by the CILA rate model must be indicated as necessary by the CILA agency and ISC agency, are not common to all individuals residing in CILAs, and may be required more intensely soon after an individual moves into a CILA, with decreasing need for them over time. Department staff review all requests for individual non-base supports and must approve any reimbursements added to an individual's CILA rate or awarded as billable supports. The need for non-base support hours must be periodically (at least annually) reviewed by professional assessment; the individual's assessment results shall be reported to the Department for its review and decision making regarding a continued need for non-base support hours.

c) An individual CILA rate does not include costs associated with providing day programs to individuals living in CILAs. All day program authorizations the individual is approved for must be billed as a separate service or support.

d) Third party payment information concerning an individual's unearned income is obtained from the Reporting of Community Services (ROCS) System and used to calculate the third-party payment. The third-party payment may be subtracted from the top line rate to produce the bottom-line rate, or the rate paid by the Department to the community CILA agency.

- e) DDD may develop, implement, and modify different CILA rate methodologies for different types of CILA services and supports.

(Source: Added at 47 Ill. Reg. _____, effective _____)

SUBPART B: SERVICE REQUIREMENTS

Section 115.200 Description

- a) A ~~community integrated living arrangement (CILA)~~ is a residence where an individual with developmental disabilities may reside~~living arrangement which promotes residential stability for an individual who resides in his or her own home, in a home shared with others, or in the natural family home and receive who is provided with an array of~~ services and supports coordinated by a licensed CILA agency as outlined in their Personal Plan and Implementation Strategy~~to meet his or her needs~~. The individual or guardian actively participates in choosing CILA~~an array of~~ services and in choosing a home from among those living arrangements~~available to the general public and/or housing owned or controlled~~leased by a CILA~~an~~ agency.~~If, over time, less intensive services are needed, the service array shall be changed rather than requiring the individual to move to a different setting unless specific services as funded and provided are no longer needed. If, over time, the individual needs more intensive services, the agency will make a reasonable effort to modify the service array rather than requiring the individual to move to a different setting. The services must continue to be able to be provided within the scope and resources of the CILA program. The individual may remain in his or her own home. Once accepted for service by an agency, termination of services may only occur by voluntary withdrawal of the individual or resulting from the recommendation of the interdisciplinary process and based on the criteria contained in Section 115.215.~~
- b) CILA agencies shall comply with Person-Centered Planning requirements outlined in 42 CFR 441.301(c)(1) through (c)(3); 59 Ill. Adm. Code 120; Section 115.230; the provider agreement; and attachments to the provider agreement.
- c) CILAs shall comply with 42 CFR 441.301(c)(4), which specifies settings requirements for individuals receiving services through the Medicaid HCBS Waiver. CILA settings shall have all of the following qualities, and other qualities as determined to be appropriate, based on the needs of the individual as indicated in their Personal Plan. A CILA setting and/or services shall:
- 1) Be integrated in, and support full access of individuals receiving Medicaid HCBS to, the greater community, including opportunities to:

- A) engage in community life to the extent chosen by the individual;
 - B) control personal resources; and
 - C) receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS;
 - 2) Ensure an individual's rights of privacy, dignity, and respect;
 - 3) Ensure freedom from coercion and Restraint (except as specified in Section 115.245);
 - 4) Optimize, but not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact; and
 - 5) Facilitate individual choice, with the assistance of an ISC agency, regarding services and supports and who provides them.
- d) A provider-owned or controlled living arrangement shall also meet the following additional conditions:
 - 1) Be a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement, as determined by the Department and by the individual receiving services. The individual shall have, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity. For settings in which landlord/tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement, as determined by the Department, will be in place for each HCBS participant, and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.
 - 2) Each individual shall have privacy in their living arrangement:
 - A) Entrance doors shall be lockable by the individual, with only the individual and appropriate staff having keys to doors.
 - B) Individuals sharing living arrangements shall have a choice of roommates in that setting.

C) Individuals shall have the freedom to furnish and decorate their living arrangements within the lease or other agreement.

3) Individuals shall have the freedom and support to control their own schedules and activities and have access to food at any time.

4) Individuals shall be able to have visitors of their choosing at any time.

5) The setting shall be physically accessible to the individual. All communal areas must meet standards set forth by the ADA and other federal, State, or municipal regulations. CILA providers must ensure sites are certified and have capacity for individuals who use wheelchairs or other mobility devices before offering placement. The capacity for individuals who use wheelchairs or other mobility devices is indicated in the certification letter given to each CILA provider by the Department for every site.

6) Any modification of the additional conditions under subsections (d)(1) through (5) must be supported by a specific assessed need and justified in the Personal Plan. The Personal Plan shall:

A) Identify a specific and individualized assessed need.

B) Document the positive interventions and supports used prior to any modifications to the Personal Plan.

C) Document less intrusive methods of meeting the need that have been tried but did not work.

D) Include a clear description of the condition that is directly proportionate to the specific assessed need.

E) Include regular collection and review of data to measure the ongoing effectiveness of the modification.

F) Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated.

G) Include the informed consent of the individual and guardian.

H) Include an assurance that interventions and supports will cause no harm to the individual.

e) CILA services are intended to promote the safety, well-being, and involvement of

the individual in community life.

f~~b~~) CILA providers:

- 1) Shall thoroughly assess the needs of the individual to determine if the provider's CILA setting and services are appropriate. No otherwise qualified individual shall be denied placement in a CILA solely on the basis of their diagnosis.
- 2) Shall assess their ability to serve individuals and shall not deny placement unless and until the provider has worked with the Division to explore all possible options and alternatives.
- 3) Must provide reasonable accommodations or modifications for individuals who reside in the CILA home and require such accommodations or modifications. Providers should access all available resources, including but not limited to, home modifications available in the DD Adult waiver and community resources. ~~Licensed CILA agencies technically agree to a no-decline option; however, the agency may decline services to an individual because it does not have the capacity to accommodate the particular type or level of disability (e.g., an agency that serves only individuals with autism) and cannot, after documented efforts, locate a service provider which has the capacity to accommodate the particular type or level of disability. No otherwise qualified persons shall be denied placement in a CILA solely on the basis of his or her physical disability. The CILA agency or service provider associated with such agency must provide a reasonable accommodation for such persons, unless the accommodation can be documented to cause the agency or other service provider an undue hardship or overly burdensome expense.~~

~~e) Services shall be oriented to the individual and shall be designed to meet the needs of the individual with input and participation of his or her family as appropriate. Individuals are recognized as persons with basic human needs, aspirations, desires and feelings and are citizens of a community with all rights, privileges, opportunities and responsibilities accorded other citizens. Only secondarily are they individuals who have a mental disability.~~

g~~d~~) Based on their needs, individuals shall receive supervision and supportive services which may range from continuous to intermittent. A CILA setting~~CILAs~~ shall ~~be designed to~~ promote maximum~~optimal~~ independence, choice-making, access to ~~in daily living, economic self-sufficiency and integration into the community and skill building for each individual as indicated in their Personal Plan~~through the interdisciplinary process.

- 1459
- 1460 he) The CILA agency shall request in writing to the Department for approval to
- 1461 change the staffing model from the one funded and in use; (e.g., from 24-hour-
- 1462 shift~~shift~~ staff to host~~foster~~ family home, or from 24-hour-shift staff to
- 1463 intermittent supports)~~foster family home to live in support staff, for a person~~
- 1464 receiving~~in a~~ CILA service~~site~~. The Department shall review and act upon the
- 1465 request within 15 working days. The Department shall make its decision based on
- 1466 the needs of the individuals receiving services and the ability of the proposed
- 1467 staffing model to equally provide for their needs.
- 1468
- 1469 f) ~~The agency shall have a plan and arrangements for providing relief for employees~~
- 1470 ~~and contractual workers who have responsibility more than eight consecutive~~
- 1471 ~~hours or five consecutive days for individuals receiving services, and shall have~~
- 1472 ~~evidence of implementation of the plan and arrangements. Any such plan shall~~
- 1473 ~~comply with federal and State labor laws and shall provide recognition of the~~
- 1474 ~~need for respite in foster care model settings.~~
- 1475
- 1476 i) Once accepted for service by a CILA agency, termination of services may only
- 1477 occur pursuant to Section 115.215.
- 1478

1479 (Source: Amended at 47 Ill. Reg. _____, effective _____)

1480

1481 **Section 115.205 Respite Services~~services~~ for Persons~~persons~~ with a Developmental**

1482 **Disability~~developmental disability~~**

1483

- 1484 a) An individual with a developmental disability not currently receiving CILA
- 1485 services may be considered for a short term stay of no more than two consecutive
- 1486 weeks for respite services in an available CILA site only if:
- 1487
- 1488 1) The individual to be provided respite services meets the eligibility criteria
- 1489 as defined in Section 115.210;
- 1490
- 1491 2) The space to be used does not cause the applicable CILA site to exceed
- 1492 Department authorized physical capacity as defined by Section 115.300;
- 1493
- 1494 3) All individuals and/or guardians of the individuals residing in the living
- 1495 arrangement~~home~~ support and understand to the best of their ability the
- 1496 use of and the request for respite services;
- 1497
- 1498 4) Space used for respite services is not the space normally used by anyone
- 1499 regularly receiving services at this CILA site who is temporarily away;
- 1500
- 1501 5) The individual receiving respite services has bedroom space available for

their~~his or her~~ use; and

6) The CILA~~If the~~ agency has a Residential Respite contract with the
Department~~is requesting funding for respite services, the agency must~~
~~receive written approval for respite services from the Department prior to~~
~~placement of the individual in a CILA or within 48 hours after placement~~
~~of the individual in a CILA for respite services on an emergency basis.~~
~~The Department will respond to the request for respite services within 48~~
~~hours after receiving a request for emergency respite and within 14 days~~
~~after receiving non-emergency requests.~~

- b) Prior to accepting an individual for respite services, a CILA~~an~~ agency will require that the individual have a physician statement that he or she does not have any contagious disease. Additionally, the CILA agency will document that the individual will not jeopardize in other ways the health and safety of the individuals living there.
- c) Requests for respite services needed for longer than two weeks must be reviewed and approved by the Department prior to the end of the initial two-week~~first two week~~ period. Such extensions will be considered only in emergency situations.
- d) Payment for respite services provided in CILA settings will be determined case by case and will depend upon the needs of the individual and the funding currently available for respite.
- e) Guests (individuals not receiving CILA or respite services at this location) of individuals living at the site may spend the night or weekend if that is agreeable to all other individuals with whom the home is shared and with appropriate arrangements by the CILA~~provider~~ agency. Such guests shall not be considered to be receiving respite services and shall not be subject to the requirements of this Part.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.210 Criteria for Participation ~~participation of~~ Individuals~~individuals~~

- a) An individual receiving services in a CILA shall be at least 18 years of age (unless the age waiver exception in subsections (b) and (c) applies), have a developmental~~mental~~ disability and be in need of CILA~~an array of~~ services and a supervised living arrangement. If a CILA~~an~~ agency does not have the capacity to accommodate the individual's particular type or level of disability, this does not render the individual ineligible for CILA services.

- b) CILA agencies can request an age waiver to allow individuals who are at least 17.5, but not yet 18 years of age, to receive services in a CILA. If a CILA agency requests an age waiver the CILA agency shall present in writing to the Department its rationale for the waiver request and describe the following:
- 1) the individual's level of functioning;
 - 2) behavioral, medical, and/or mental health needs of the individual;
 - 3) the profiles of the other people currently residing in the proposed setting (i.e., gender, ages, interests, peer group dynamics, level of functioning, etc.);
 - 4) other residential options that have been explored;
 - 5) the education plan of the individual (i.e., will the individual continue school);
 - 6) crisis (homeless, abuse, neglect) status, if applicable; and
 - 7) problems in the individual's current placement, if applicable.
- c) The Department will provide a written response to the waiver request indicating approval or denial of the request. The provision of a waiver does not constitute authorization of services.
- ~~db~~) The individual or guardian shall give informed consent to participate in a CILA, which shall be documented in the individual's record.
- ~~ee~~) The individual or guardian shall agree to participate in the development of the Individual's Personal Plan as well as the development and provision of an Implementation Strategy that corresponds with their Personal Plan ~~implementation of the individual integrated services plan, which shall be indicated by the individual's or guardian's signature on the plan or a note describing why there is no such signature.~~

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.214 Individuals Requiring Additional Services and Support

There are occasions when an individual receiving CILA services requires additional services and support as a result of changes in medical or behavioral health. Examples include, but are not limited to, a gradual deterioration of health and/or behavioral stability or a more recent acute

medical condition and/or a sudden intense behavioral episodes. The CILA agency must take reasonable and appropriate action to address and stabilize the individual's situation for the health and safety of the individual and/or others.

a) When an individual receiving CILA services requires additional services and support, the CILA agency's Provider Support Team shall be convened. The CILA agency's designated QIDP shall:

- 1) Convene a meeting including, but not limited to, the individual, the individual's guardian, the Provider Support Team, relevant staff as determined by the QIDP (e.g., CILA agency administrative leadership staff, as necessary), and a representative of the ISC agency.
- 2) The team will consider the current system of services and supports, including the use of internal CILA agency resources, external consultants, and the effectiveness of the current Personal Plan, Implementation Strategy, and other service planning documents. The CILA provider must notify the ISC agency when changes to the Personal Plan are needed.
 - A) If not in place and indicated by the situation, a behavioral support strategy will be developed to outline the plan of action. If there is a current behavior support plan, it will be reviewed and revised as necessary.
 - B) If complex medical conditions are a concern, the team will review the current Personal Plan and Implementation Strategy to ensure needed medical services and supports are in place.
 - C) The team will determine whether the CILA agency will request additional staff resources or other supports from DDD.
 - D) The team will determine whether to request technical assistance, training, short-term residential stabilization supports, or other necessary consultation from the Division.
 - E) Should the team request additional staff resources or other supports as described in subsection (a)(2)(C) – (D), the Department will respond to the request as soon as possible but no later than ten business days following receipt of the request.

b) The steps outlined in subsection (a) must be followed by a CILA agency prior to termination of its services (see Section 115.215), except as specified in 59 Ill. Adm. Code 120.110(i).

- c) Following the team meeting described in subsection (a)(1), it is expected that, after additional staff resources and consultations have been implemented, at least 30 calendar days will be invested in determining the effectiveness of the behavior support plan or medical services, including any relevant revisions, as well as the benefit of any additional staff resources and consultations, before recommending termination of the CILA agency's services. The 30 calendar days do not include absences from the CILA for necessary medical or behavior-related services.

(Source: Added at 47 Ill. Reg. _____, effective _____)

Section 115.215 Criteria for Termination from a CILA Agency~~termination of individuals~~

- a) The community support team shall consider recommending termination of CILA services ~~of~~ an individual only if:
- 1) The medical needs of the individual cannot be met by the CILA program; or
 - 2) The behavior of an individual places the individual or others in serious danger; or
 - 3) The individual is to be transferred to a program offered by another agency and the transfer has been agreed upon by the individual, the individual's guardian, the transferring agency, and the receiving agency; or
 - 4) The individual no longer benefits from CILA services.
- b) Termination of services shall occur only if the termination recommendation has been approved by the Department. For individuals enrolled in the Department's Medicaid ~~DDD~~ Waiver, termination of services is subject to review according to 59 Ill. Adm. Code 120.
- c) Absences.~~Absenses~~
- ↳ Whenever individuals are required to be absent from a living arrangement for an extended period of time, a CILA~~an~~ agency shall not consider this absence as a reason for termination of services. CILA providers shall protect individual's rights as outlined in Section 115.250(c) and are therefore prohibited from coercing, restricting, or imposing any type of consequence on an individual who chooses to visit their family, friends or other persons important to the individual as documented in the individual's Personal Plan and Implementation Strategy.~~unless the~~

absence has been at least 60 days in duration and it is documented that the absence is expected to continue indefinitely. The Department reserves the right to terminate payment within the 60 days during which the individual is absent when it is clear that the individual will be unable to return to the CILA.

2) If an individual is to be away from his or her residence for an extended time period and the intent is that he or she will return to the residence, the licensed agency shall contact the Department in writing to request authorization for the absence. A request for extension of the absence must be submitted to the Department at the end of 30 consecutive days and after 60 consecutive days. If the absence exceeds 90 consecutive days in duration, funding for CILA services for the individual will cease. Prior to the end of 30 consecutive days and again, prior to the end of 60 consecutive days, the agency shall receive approval from the Department for funding of a continued absence. The request shall be documented and forwarded to the attention of the Department for approval. The Department shall respond to each request within 14 days. Continued funding past 30 days will be determined according to Department guidelines and will consider, but not be limited to, the following:

- A) Services being provided to the individual by the agency during the absence;
- B) The continued likelihood of the individual being able to return to the site; and
- C) Continuing funding available to the agency to support the site.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.220 Services and Supports~~Community support team~~

~~Agencies licensed to certify CILAs shall provide for services through a community support team (CST)~~

- a) The CILA agency~~CST~~ shall develop and maintain a Provider Support Team for each~~consist of the QMRP or QMHP, as indicated by the individual's primary disability, the~~ individual served. The makeup of; the team shall include a QIDP and a DSP; a nurse, or other professionals (such as occupational therapist or speech therapist) when necessary, and other staff as consistent with individual's guardian or parent (unless the individual's Personal Plan~~individual is his or her own guardian and Implementation Strategy~~ chooses not to have his or her parent

involved, or if the individual has a guardian and the guardian chooses not to involve the individual's parent), providers of services to the individual from outside the licensed CILA provider agency, The provider support team shall; and persons providing direct services in the community;

b) ~~The CST shall be the central structure through which CILA services are provided to one or more individuals. The CST shall:~~

- 1) Be responsible for all service functions required to support the outcomes of that area of the individual's Personal Plan for which the CILA agency has responsibility, including the development of the Implementation Strategy~~assessment, planning, coordination and delivery~~;
- 2) Provide care and supervision based on the known and assessed needs of the individual;
- 3) Help the individual participate in an array of community support services, as chosen by the individual and guardian tailored to their needs;
- 42) In collaboration with the ISC, provide or arrange for~~Provide~~ direct service in the community or in other facilities, such as State-operated facilities, convalescent care facilities, community hospitals or rehabilitation facilities, based on the assessed needs of the individual and when the facilities permit;
- 3) ~~Help the individual to participate in the design of an array of community support services tailored to his or her needs;~~
- 4) ~~Be responsible for providing or helping individuals to access the services specified in their plans; and~~
- 5) Be available to support the individual ~~respond to an individual's needs~~ on a 24-hour basis.

e) ~~The CST shall be directly responsible for:~~

- 1) ~~Modifying the services plan based on on-going assessment and recommendations;~~
- 2) ~~Linking individuals to resources and services;~~
- 63) Advocate~~Advocating~~ on behalf of individuals;

- 4) ~~Providing informational, educational and advocacy services to family members;~~
- 75) ~~Assist~~Assisting individuals to ~~select~~, obtain, and maintain ~~CILAs which afford~~ safety and basic comforts within the CILA setting;
- 86) ~~Provide~~Participating with other providers of direct service during stays in other environments such as State-operated facilities, convalescent care facilities, community hospitals or rehabilitation facilities; continuing in-facility contact, participating in the services plan development, and the on-going interdisciplinary process; ~~providing~~ on-going services to ensure the maintenance of the individual's living arrangement during ~~these~~ times of absence, such as paying the rent and utilities;
- 97) ~~Assist~~Assisting the individual in developing community supports and ~~fostering~~ relationships as indicated in their Plan, with non-paid persons in the community, e.g., neighbors, volunteers, and landlords;
- 108) ~~Provide~~Providing personal support and assistance to the individual in gaining access to vocational training, employment opportunities, educational services, legal services, ~~employment opportunities~~, and leisure recreational, religious, ~~recreation, religion~~ and social activities as indicated in their Plan;
- 119) ~~Provide~~Providing assistance to the individual in obtaining health (including dietary) and dental services, mental health treatment and rehabilitation services (including physical therapy and occupational therapy), and substance abuse services, as needed;
- 1240) ~~Provide~~Providing supportive counseling and problem-solving assistance on an on-going basis and at times of crisis, as needed;
- 1344) ~~Assist~~Assisting individuals with activities of daily living through skill training and acquisition of assistive devices, as needed;
- 1442) ~~Assist~~Assisting the individual in accessing medication information including observing and reporting effects and side effects of prescribed medications, as needed;
- 13) ~~Assisting the individual in accessing and providing training to obtain emergency medical services including State-operated facility services;~~
- 1544) ~~Provide~~Providing assistance, as needed, in money management. This can

~~include, including~~ representative payeeship and protecting individual funds. The CILA provider may accept funds from an individual for safekeeping and management if the service provider receives written authorization from the individual or the individual's guardian, as applicable. The CILA provider shall maintain a written record that shall include, but not be limited to, all financial arrangements and transactions involving each individual recipient's funds. The CILA provider shall allow each individual and guardian access to that written record [210 ILCS 135/9.1]. ~~and applying for financial entitlements including assisting individuals to access the Department's Home Services Program (89 Ill. Adm. Code: Chapter IV, Subchapter d); and~~

~~16~~15) ~~Assist~~Assisting individuals to access transportation, as needed.

17) Provide access to sex education, related resources and services that supports an individual's right to sexual health and healthy sexual practices and to be free from sexual exploitation and abuse. The individual shall be assessed on whether he or she has decision making capacity to give consent to sexual activity; and for developmentally appropriate sex education materials and resources. Course material in sex education must be approved by the Department prior to implementation [405 ILCS 5/4-211].

~~bd)~~ The agency shall provide or arrange for those services not indicated in subsection (e) of this Section, but identified in the individual integrated services plan as needed by the individual. If arranged, such services shall be documented in a written agreement between the licensed agency and the other service providers and shall minimally address training, services to be provided, quality assurance requirements and protection of the individual's rights. ~~The CILA agency shall remain responsible for~~ ensuring~~insuring~~ the quality of services it provides and the protection of the individual's rights as enumerated in Section 115.250.

~~ce)~~ A ~~QIDP~~CST member who is a QMRP or a QMHP shall be designated for each individual and shall, in conjunction with the Provider Support Team:

1) Develop~~Convene~~ the initial Implementation Strategy, using Form IL462-4470 provided by the Division, within 20 calendar days~~CST as required by Section 115.230 to revise the services plan as part~~ of the CILA provider's dated signature on the Personal Plan and update the Implementation Strategy at least annually as the Personal Plan is modified, or more often if warranted by a change in functional status or at the request of the individual or guardian~~interdisciplinary process;~~

- 2) Explain all rights enumerated in Section 115.250 and document in the individual's record that this has been done upon the individual's entry into a CILA;
- 32) Ensure~~Assure~~ that the services specified in the Implementation Strategy~~services plan~~ are being provided;
- 43) Coordinate employees, other~~Assure the participation of team members and necessary non-team member~~ professionals, and any other person, compensated or in a volunteer capacity, to implement the Implementation Strategy;
- 4) ~~Assure and document in the individual's record, at least quarterly, that the individual's residence meets environmental standards as specified in Subpart C of this Part;~~
- 5) Identify and address gaps in the Implementation Strategy~~service provision~~;
- 6) Identify and inform the ISC agency of potential needed changes to the Personal Plan;
- 76) Monitor the individual's status in relation to the Implementation Strategy~~services plan~~;
- 87) Advocate for the individual's rights and services;
- 8) ~~Facilitate individual linkage and transfer;~~
- 9) Ensure that information specified by the Personal Plan is included in the individual's~~Provide for a written record of team meetings within 30 days after each team meeting;~~
- 10) Ensure availability of a written Personal Plan and Implementation Strategy to the Provider Support Team members~~Assure that information specified by the services plan is included in the individual's record; and~~
- 11) Work with the individual and/or guardian to address issues that must be resolved or brought to the attention of the team by the individual and/or guardian.~~Initiate and coordinate the interdisciplinary process as often as specified in the services plan or when required by problems or changes;~~
- 12) ~~Assure availability of a written services plan to all team members; and~~

~~13) Work with the individual and parent(s) and/or guardian to convene special meetings of the CST when there are issues that need to be addressed as brought to the attention of the team by the individual, parent(s) and/or guardian.~~

df) A mental health professional may provide all services identified in subsections (b)(2)~~(e)(1)~~ through ~~(13) except (1), (9), and~~ (11) of this Section.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.225 Assessments

The CILA agency shall ensure that each individual receives an initial assessment and reassessments that shall be documented in the individual's record, and the results shall be explained to the individual and/or guardian. Valid assessments described in this Section and made available from the ISC agency do not have to be duplicated.

a) Assessments shall be performed by employees trained in the use of assessment instruments.

b) Through the selection of the assessment instruments and the interpretation of results, all assessments shall be sensitive to the individual's:

1) Racial, ethnic, and cultural background;

2) Chronological and developmental age;

3) Visual and auditory impairments;

4) Language preferences; and

5) Degree of disability.

c) Initial assessment for individuals with a developmental disability shall include:

1) A physical and dental examination, both within the last 12 months, which shall include a medical history;

2) Previous and current adherence to medication regimen and the level of ability to self-administer medications or participate in a self-administration of medication training program;

- 3) A screen for any health issues or risks. Each individual shall be assessed via a web-based, electronic screening tool identified by the Department; A CILA provider may make a request, along with justifications, to the Department to complete the assessment on paper;
 - 4) A psycho-social assessment including legal status, personal and family history, a history of mental illness or developmental disability and related services, evaluation of possible substance abuse, and resource availability such as income entitlements, health care benefits, subsidized housing, and social services;
 - 5) The Inventory for Client and Agency Planning (ICAP);
 - 6) A psychological assessment; in addition, a psychiatric assessment must be conducted if the individual takes psychotropic medications;
 - 7) A screening in vision, hearing, speech, and language; and
 - 8) Other assessments as required by the individual's disability, such as physical therapy, occupational therapy, activity therapy, and sign language.
- d) Annual reassessments for individuals with a developmental disability shall include:
- 1) A physical and dental examination, including a review of medications;
 - 2) The ICAP;
 - 3) An annual psychiatric examination for individuals with a mental illness;
 - 4) An annual assessment to screen individuals for any health issues or risks via a web-based, electronic screening tool as identified by the Department. A CILA provider may make a request, along with justifications, to the Department to complete the assessment on paper.
 - 5) Other initially assessed areas as determined by the team and with input from the individual and/or guardian.

(Source: Added at 47 Ill. Reg. _____, effective _____)

Section 115.230 Person-Centered Planning~~Interdisciplinary process~~

- 1974 a) CILA agencies ~~Agencies~~ licensed to provide CILA services ~~certify CILAs~~ shall
- 1975 comply with Person-Centered Planning requirements as outlined in 42 CFR
- 1976 441.301(c)(1) through (c)(3) and in 59 Ill. Adm. Code 120. ~~comprehensively~~
- 1977 ~~address the needs of individuals through an interdisciplinary process.~~
- 1978
- 1979 a) ~~Through the interdisciplinary process, the CST shall be responsible for preparing,~~
- 1980 ~~revising, documenting and implementing a single individual integrated services~~
- 1981 ~~plan for each individual.~~
- 1982
- 1983 b) ~~The following shall be included in the interdisciplinary process:~~
- 1984
- 1985 1) ~~The individual or his or her legal guardian, or both;~~
- 1986
- 1987 2) ~~Members of the individual's family unless the individual is not legally~~
- 1988 ~~disabled and does not desire the involvement of the family or the family~~
- 1989 ~~refuses to participate;~~
- 1990
- 1991 3) ~~Significant others—chosen by the individual;~~
- 1992
- 1993 4) ~~The QMRP or the QMHP; and~~
- 1994
- 1995 5) ~~Other members of the CST.~~
- 1996
- 1997 e) ~~As needed to meet the individual's needs, the following shall be included in the~~
- 1998 ~~interdisciplinary process:~~
- 1999
- 2000 1) ~~Persons in addition to the CST who provide habilitation, treatment or~~
- 2001 ~~training; and~~
- 2002
- 2003 2) ~~Professionals who assess the individual's strengths and needs, level of~~
- 2004 ~~functioning, presenting problems and disabilities , service needs and who~~
- 2005 ~~assist in the design and evaluation of the individual's services plan.~~
- 2006
- 2007 d) ~~Upon the individual's entry into a CILA, the QMRP or the QMHP shall:~~
- 2008
- 2009 1) ~~Document in the record those services being provided to the individual~~
- 2010 ~~until an individual integrated services plan is developed; and~~
- 2011
- 2012 2) ~~Explain all rights enumerated in Section 115.250 and document in the~~
- 2013 ~~individual's record that this has been done.~~
- 2014
- 2015 e) ~~The agency shall assure that each individual receives an initial assessment and~~
- 2016 ~~reassessments that shall be documented in the individual's record and the results~~

explained to the individual and guardian.

- 1) ~~The assessments shall determine the individual's strengths and needs, level of functioning, the presenting problems and disabilities, diagnosis and the services the individual needs.~~
- 2) ~~Assessments shall be performed by employees trained in the use of the assessment instruments.~~
- 3) ~~Through the selection of the assessment instruments and the interpretation of results, all assessments shall be sensitive to the individual's:~~
 - A) ~~Racial, ethnic and cultural background;~~
 - B) ~~Chronological and developmental age;~~
 - C) ~~Visual and auditory impairments;~~
 - D) ~~Language preferences; and~~
 - E) ~~Degree of disability.~~
- 4) ~~Initial assessment for individuals with a mental disability shall include:~~
 - A) ~~A physical and dental examination, both within the past 12 months, which shall include a medical history;~~
 - B) ~~Previous and current adherence to medication regime and the level of ability to self-administer medications or participate in a self-administration of medication training program;~~
 - C) ~~A psycho-social assessment including legal status, personal and family history, a history of mental disability and related services, evaluation of possible substance abuse, and resource availability such as income entitlements, health care benefits, subsidized housing and social services;~~
 - D) ~~An assessment with form DMHDD-1215, "Specific Level of Functioning Assessment and Physical Health Inventory," (SLOF) for individuals with a mental illness and with the Inventory for Client and Agency Planning (ICAP) (Riverside Publishing Co., 425 Spring Lake Drive, Itasca IL 60143 (1986)) or the Scales of Independent Behavior Revised (SIB-R) (Riverside Publishing Co.,~~

~~425 Spring Lake Drive, Itasca IL 60143 (1996)) for individuals with a developmental disability;~~

- ~~E) An educational and/or vocational assessment including level of education or specialized training, previous or current employment, and acquired vocational skills, activities or interests;~~
- ~~F) A psychological and/or a psychiatric assessment; both must be conducted for individuals with both a mental illness and a developmental disability;~~
- ~~G) A communication screening in vision, hearing, speech, language and sign language; and~~
- ~~H) Others as required by the individual's disability such as physical therapy, occupational therapy and activity therapy.~~

~~5) Annual reassessments for individuals with a mental disability shall include:~~

- ~~A) A physical and dental examination including a review of medications;~~
- ~~B) The SLOF for individuals with a mental illness or ICAP or SIB for individuals with a developmental disability;~~
- ~~C) An annual psychiatric examination for individuals with a mental illness;~~
- ~~D) Other initially assessed areas, as necessary.~~

b) CILA agencies licensed to provide CILA services shall comprehensively address the needs of individuals through the development of an Implementation Strategy for each individual as it relates to their Personal Plan.

1f) Within 20 calendar days of the provider's dated signature on~~30 days after an individual's entry into~~ the Personal Plan, an Implementation Strategy using Form IL462-4470 provided by the Division,~~CILA program, a services plan~~ shall be developed that:

- A+) Is based on the Personal Plan developed by the ISC agency and assessment results;

B) Includes the participation of the individual and guardian and the ISC as necessary;

C2) Reflects the individual's and~~or~~ guardian's agreement~~preference~~ as indicated by a signature on the Implementation Strategy~~plan or staff notes indicating why there is no signature and why the individual's or guardian's preference is not reflected;~~

D) Addresses outcomes identified in the Personal Plan that the CILA agency agreed to support; and

E3) Identifies services and supports to be provided~~and~~ by the CILA agency that agreed to support the individual to attain skills or achieve outcomes identified in the Personal Plan~~whom; and~~

4) ~~States goals and objectives. Objectives shall:~~

A) ~~Be measurable;~~

B) ~~Have timeframes for completion; and~~

C) ~~Have an employee assigned responsibility.~~

g) ~~The individual integrated services plan shall identify the CILA site chosen with the individual's and guardian's participation and shall indicate the type and the amount of supervision provided to the individual.~~

h) ~~The services plan shall address goals of independence in daily living, economic self-sufficiency and community integration.~~

i) ~~The services plan shall include the names and titles of all employees and other persons contributing to the plan.~~

j) ~~The services plan shall be signed by the QMRP and the QMHP and the individual or guardian.~~

2k) The individual and~~or~~ guardian shall be given a copy of the Implementation Strategy and subsequent updates~~services plan~~.

3l) The Implementation Strategy and subsequent updates~~services plan~~ shall become a part of the individual's record.

4m) At least monthly, the QIDP~~QMRP and QMHP~~ shall review the

Implementation Strategy~~services plan~~ and shall document in the individual's record whether~~that~~:

A1) Services are being implemented as identified in the Implementation Strategy;

B2) Services identified in the Implementation Strategy~~services plan~~ continue to meet the individual's needs or require modification or change to better meet the individual's needs;~~and~~

C) Outcomes are being supported as specified in the Personal Plan and Implementation Strategy;

D) Progress is being made toward outcomes as identified in the Personal Plan and Implementation Strategy. If there is no progress made, CILA agencies must document barriers and/or reasons why progress was not made.

E) The QIDP shall sign and date the monthly record.

~~3)~~ ~~Actions are recommended when needed.~~

5n) Updates~~The CST~~ shall be made to the Implementation Strategy as~~review~~ the Personal Plan is modified, or more often if warranted by a change in functional status or at the request of the individual or guardian~~services plan as a part of the interdisciplinary process at least annually for individuals with developmental disabilities and semi-annually for individuals with mental illness and shall note progress or regression which might require plan amendment or modification.~~ CILA agencies must provide the individual, guardian, and ISC with updated copies of the Implementation Strategy.

6e) All services specified in the Implementation Strategy~~services plan~~, whether provided by an employee of the licensed CILA agency, consultants, volunteers, or sub-contractors, shall be provided by or under the supervision of a QIDP~~QMRP or a QMHP~~, as appropriate, based on the individual's primary disability.

7p) The CILA~~provider~~ agency must ensure that current copies (digital or paper) of individuals' Personal Plans and Implementation Strategies~~service plans~~ are kept at the individuals' residences. The CILA~~provider~~ agency must also ensure that DSPs~~direct care workers~~ (including employees, contractual persons, volunteers and host family members) are

knowledgeable about the individuals' Personal Plans and Implementation Strategies~~service plans~~, are trained in their implementation, and maintain records regarding the individuals' progress toward the outcomes identified in goals and objectives of the Personal Plans and Implementation Strategies~~individual service plans~~.

8q) The Provider Support Team, with concurrence by the ISC agency,
~~Through the interdisciplinary process the CST~~ shall be responsible for determining an individual's ability to transition from continuous supervision or support to an intermittent level of supervision or support.

A1) If a determination is made that the individual is appropriate for a less restrictive environment, documentation shall be included in the individual's Personal Plan~~plan~~ identifying time frames for transition. The Implementation Strategy shall be modified in accordance with the Personal Plan changes. The QIDP~~individual's QMRP or QMHP~~ shall be responsible for monitoring the individual's transition~~transitional plan~~ and for documenting the individual's progress toward intermittent supervision and supports.

B2) If a determination is made that an individual with a developmental disability is appropriate for intermittent supervision and supports, the ISC agency ~~PAS agency~~ in conjunction with the CILA~~provider~~ agency must submit a completed CILA rate determination packet to the Department for development of a rate to support the intermittent supervision and supports.

3) ~~For individuals with a developmental disability, funding will remain at the individual's current level of funding for the first three months. At the end of the first three months, the QMRP or QMHP shall convene the CST to assess the individual's attainment of his or her goal for less restrictive supervision and supports. If the CST determines that the individual requires additional time to complete a successful transition, a request shall be made in writing to the Department for an extension not to exceed a total of six months. If the CST determines that the individual has not met, and is not likely to meet, his or her goal for less restrictive supervision and supports, the individual will continue to receive continuous supervision or support.~~

9f) An individual who requires continuous supervision or support, as indicated by the Personal Plan and Implementation Strategy, ~~indefinitely~~ may stay alone or access the community independently under specific circumstances.

- A) The provider support team~~CST~~ must assess whether ~~determine that~~ the individual has the ability and desire to stay alone safely for brief periods of time, or access specified locations in the community independently, or with supervision and support other than that provided by CILA agency employees. This should occur only as part of the individual's needs and preferences and not to accommodate staffing concerns or convenience.
- B) The Implementation Strategy ~~individual service plan~~ must state the periods of time and restrictions on activities when at home, and locations and time frames for accessing the community.
- C) The CILA agency must document the results of the ~~individual will successfully complete an~~ assessment regarding the individual's ~~demonstrating the~~ skills necessary to ensure their ~~assure his or her~~ safety, and this must be part of the individual's record. The CILA provider shall also provide the assessment results to the ISC responsible for updating the Personal Plan. ~~This should occur only as part of the individual's habilitation/treatment process, and not to accommodate staffing concerns.~~

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.240 Medical Services~~services~~ and Medications~~medications~~

When medical services and/or medications are provided, or their administration is supervised, by employees of the licensed CILA agency, the licensed CILA agency shall certify that they are provided or their administration is supervised in accordance with the Mental Health and Developmental Disabilities Administrative Act [20 ILCS 1705] ~~Medical Practice Act of 1987~~ and the Illinois Nurse ~~Nursing and Advanced Practice Nursing~~ Act [225 ILCS 65]. The licensed CILA agency must comply with 59 Ill. Adm. Code 116. The CILA agency shall additionally document:

- a) A licensed physician (MD or DO) shall be responsible ~~for the medical~~ for medical services, including prescription of medications. ~~provided to individuals, and the management of, individuals' medications.~~
- b) ~~A licensed prescriber shall prescribe and monitor all prescription medications.~~
- b) A physician shall perform an examination of the individual prior to the initiation of psychotropic medications.

- 2275 cd) Screening, using the AIMS (Abnormal Involuntary Movement Skills), for and
 2276 documentation of abnormal involuntary movements, including tardive dyskinesia,
 2277 in individuals receiving prescribed psychotropics shall be completed at least every
 2278 six months by the prescribing clinician or employees trained in performing this
 2279 type of assessment.
 2280
- 2281 de) A physician shall review the medications prescribed and shall see the individual at
 2282 least every six months, and more frequently if required by a psychiatrist ~~every~~
 2283 ~~three months if psychotropic medications have been prescribed~~. Physician
 2284 documentation within the individual's record shall include, but is not limited to,
 2285 the following:
 2286
- 2287 1) Rationale for continuing current medications and/or initiating new
 2288 medications; and
 - 2289 2) Medication side effects.
 2290
- 2291
- 2292 e) A licensed medical professional must evaluate the ability of the individual to self-
 2293 administer medication. Ability to self-administer medication must be reassessed
 2294 at least annually. Individuals with developmental disabilities must be evaluated
 2295 using Department approved screening and assessment tools, in accordance with
 2296 59 Ill. Adm. Code 116.
 2297
- 2298 ~~f)~~ ~~A physician or registered professional nurse shall evaluate the ability of the~~
 2299 ~~individual to self-administer medications. Ability to self-administer medication~~
 2300 ~~shall be reassessed at least quarterly for individuals with mental illness (including~~
 2301 ~~those dually diagnosed with a mental illness and a developmental disability) and~~
 2302 ~~at least annually for individuals with a developmental disability. Individuals with~~
 2303 ~~a developmental disability (including those dually diagnosed with a mental illness~~
 2304 ~~and a developmental disability) shall be evaluated using Department approved~~
 2305 ~~screening and assessment tools, in accordance with 59 Ill. Adm. Code 116.~~
 2306
- 2307 ~~g)~~ ~~A physician will provide the written order for an individual to self-administer~~
 2308 ~~medications or participate in a self-administration of medication training program~~
 2309 ~~based on the results of the individual's evaluation. The order will become part of~~
 2310 ~~the individual's record.~~
 2311
- 2312 fh) A medical professional who is licensed to prescribe medications ~~psychiatrist~~ will
 2313 either review psychotropic medications or be available for consultation when
 2314 psychotropic medications have been prescribed.
 2315
- 2316 gi) All medications shall be ~~are~~ labeled.
 2317

- j) ~~Individuals who are able to independently self-administer medications will have access to their medications.~~
- k) ~~When agencies supervise the self-administration of medication training programs or administer the medications, medications will be secured from unauthorized access and only a physician, pharmacist, registered or licensed practical nurse or agency employee authorized to supervise the self-administration of medication training program or administer medications will have access to medications. A physician, pharmacist or registered professional nurse will be available at all times to consult with trained, unlicensed direct care employees administering medications or supervising a self-administration of medications training program for persons with developmental disabilities.~~
- l) ~~A physician or pharmacist will be available to consult, at least monthly, with the QMRP or QMHP in reference to staff's behavioral or other observations relating to the individual's level, dosage, and types of side effects from any prescribed medications.~~
- hm) A physician or pharmacist shall make available to the CILA agency's nurse and administrative staff, and to the individual and family,~~employees, family and individuals~~ information on expected consequences, potential benefits, and side effects of any prescribed medication.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.245 Restraints

- a) The following types of restraint are prohibited. If any of the following types of restraint are utilized by a CILA agency employee, the incident must be reported via CIRAS as well as reported to the Office of the Inspector General.
- 1) Prone restraint (i.e., being restrained, face down against the floor or another surface).
 - 2) Supine restraint (i.e., being restrained, face up).
 - 3) Mechanical restraint. Mechanical restraint does not include any restraint used to treat an individual's medical needs; protect an individual known to be at risk of injury resulting from lack of coordination or frequent loss of consciousness; provide a supplementary aid or service or an accommodation, including, but not limited to, assistive technology that provides proprioceptive input or aids in self-regulation; or promote individual safety in vehicles used to transport individuals.

4) Chemical restraint is prohibited. Chemical restraint does not include medication that is legally prescribed and administered as part of an individual's regular medical regimen including PRN medication, to manage behavioral symptoms and treat medical symptoms.

b) Restraint identified in the Personal Plan.

1) Restraint shall be used only when:

A) The individual's behavior presents an immediate threat of serious physical harm to the individual or others and other less restrictive and intrusive measures have been tried and proven ineffective in stopping the immediate threat of serious physical harm;

B) It is included as a modification in an individual's Personal Plan;

C) The use of restraint has been discussed and approved for inclusion in the individual's Personal Plan by the individual or guardian and the Provider Support Team;

D) It is included in the individual's behavior strategy;

E) The use of restraint has gone through the Behavioral Management Committee/Human Rights Committee for approval;

F) The inclusion of restraint in the individual's Personal Plan and behavior strategy must include a plan to reduce and ultimately eliminate the use of restraint, as appropriate;

G) The staff applying the restraint have been trained in the use of restraint, as described below, as well as the specific type of the restraint to be used on the individual;

H) The CILA agency has reviewed, determined, and documented that there are no known medical or psychological limitations that contraindicate the use of the restraint; and

I) The CILA agency has included in the individual rights documentation, information on the CILA agency's policies and procedures for the use of restraint and this information has been shared with the individual and guardian.

- 2) Restraint shall not be used as discipline or punishment, convenience for staff, retaliation, a substitute for appropriate physical or behavioral support, a routine safety matter, or to prevent property damage in the absence of an immediate threat of serious physical harm to the individual or others.
- 3) Restraint must end immediately when:
 - A) The immediate threat of serious physical harm ends;
 - B) The individual indicates that they cannot breathe or staff supervising the individual recognizes that they may be in respiratory distress; or
 - C) The time period of 15 minutes has expired, unless approved in the individual's Personal Plan or a supervisor has approved the instance of the restraint going beyond 15 minutes.
- 4) Restraint must be implemented in the following manner:
 - A) CILA agency staff must observe and monitor the individual being physically Restrained at all times during the use of restraint.
 - B) The staff involved in physically restraining an individual must halt the restraint every 5 minutes to evaluate if the immediate threat of serious physical harm continues to exist. If the immediate threat of serious physical harm continues to exist, staff may continue to use the restraint and the continued use may not be considered a separate instance of restraint so long as the total time period of the restraint does not exceed 15 minutes.
 - C) An individual shall be released from the restraint immediately upon a determination by the staff member administering the restraint that the individual is no longer an immediate threat of causing serious physical harm to themselves or others.
 - D) The restraint shall not impair an individual's ability to breathe or communicate normally, obstruct an individual's airway, or interfere with an individual's ability to speak. If the restraint is imposed upon an individual whose primary mode of communication is sign language or an augmentative mode, the individual shall be permitted to have their hands free of restraint

for brief periods, unless the supervising staff determines that this freedom appears likely to result in harm to the individual or others.

5) Reporting requirements. When restraints are used, the CILA agency shall:

- A) Create a report specifying why and how the restraint was used. The report shall be included in the individual's file and be available for assessment by the Bureau of Quality Management during a CILA agency's review.
- B) Review the use of any incident of restraint via the Human Rights Committee.
- C) Report the incident to the CILA agency Executive Director/Chief Executive Officer.
- D) Notify the individual's guardian no later than 24 hours after any incident of restraint occurs.

c) Restraint not identified in the Personal Plan.

1) Restraint not identified in the Personal Plan occurs when the requirements of subsection (a) are not in place prior to the use of restraint. Restraint not identified in the Personal Plan:

- A) Shall be used only when the individual's behavior presents an immediate threat of serious physical harm to the individual or others, the CILA agency deems the situation an emergency, and other less restrictive and intrusive interventions have been tried and proven ineffective in stopping the immediate threat of serious physical harm.
- B) Shall not be used as discipline or punishment, convenience for staff, retaliation, a substitute for appropriate physical or behavioral support, a routine safety matter, or to prevent property damage in the absence of immediate threat of serious physical harm to the individual or others.

2) The use of restraint not identified in the Personal Plan shall be subject to the following requirements and limitations:

- A) Restraint not identified in the Personal Plan may only be employed when:

- i) The staff applying the restraint not identified in the Personal Plan have been trained in the use of restraint;
- ii) The CILA agency assessed the medical and psychological welfare of the person and there are no known medical or psychological limitations that contraindicate the use of the restraint; and
- iii) The CILA agency has included, in the individual rights documentation, information on the CILA agency's policies and procedures for the use of restraint and this information has been shared with the individual and guardian.

B) Restraint not identified in the Personal Plan must end immediately when:

- i) the immediate threat of serious physical harm ends;
- ii) the individual indicates that they cannot breathe or staff supervising the individual recognizes that they may be in respiratory distress; or
- iii) the time period of 15 minutes has expired, unless a supervisor has approved the instance of the restraint going beyond 15 minutes.

C) Restraint not identified in the Personal Plan must be employed as follows:

- i) CILA agency staff must observe and monitor the individual being physically restrained at all times during the use of restraint.
- ii) The staff involved in physically restraining an individual must halt the restraint every 5 minutes to evaluate if the immediate threat of serious physical harm continues to exist. If the immediate threat of serious physical harm continues to exist, staff may continue to use the restraint not identified in the Personal Plan and the continued use may not be considered a separate instance of restraint not identified in the Personal Plan so long as the total time

- 2531 period of the restraint not identified in the Personal Plan
 2532 does not exceed 15 minutes.
 2533
- 2534 iii) An individual shall be released from the restraint not
 2535 identified in the Personal Plan immediately upon a
 2536 determination by the staff member administering the
 2537 restraint not identified in the Personal Plan that the
 2538 individual is no longer an immediate threat of causing
 2539 serious physical harm to themselves or others.
 2540
- 2541 iv) The restraint not identified in the Personal Plan shall not
 2542 impair an individual's ability to breathe or communicate
 2543 normally, obstruct an individual's airway, or interfere with
 2544 an individual's ability to speak. If the restraint not
 2545 identified in the Personal Plan is imposed upon an
 2546 individual whose primary mode of communication is sign
 2547 language or an augmentative mode, the individual shall be
 2548 permitted to have their hands free of restraint for brief
 2549 periods, unless the supervising staff determines that this
 2550 freedom appears likely to result in harm to the individual or
 2551 others.
 2552
- 2553 v) After restraint not identified in the Personal Plan has been
 2554 used, the CILA agency shall work with the ISC to
 2555 determine whether restraint should be included in the
 2556 individual's Personal Plan and behavior strategy moving
 2557 forward.
 2558
- 2559 D) Reporting requirements. In incidents of restraint not identified in
 2560 the Personal Plan, the CILA agency shall:
 2561
- 2562 i) Create a report on the use of restraint not identified in the
 2563 Personal Plan. The Report shall be included in the
 2564 individual's file and be available for assessment by the
 2565 Bureau of Quality Management during a CILA agency's
 2566 review.
 2567
- 2568 ii) Review any use of restraint via the Human Rights
 2569 Committee.
 2570
- 2571 iii) Report the incident to the CILA agency Executive
 2572 Director/Chief Executive Officer.
 2573

iv) Send a report of each incident of restraint not identified in the Personal Plan via a report from the Critical Incident Reporting and Analysis System (CIRAS). BQM will send all incidents of restraint not identified in the Personal Plan to the Director of DDD or their designee.

v) Notify the individual's guardian no later than 24 hours after any incident of restraint not identified in the Personal Plan occurs.

d) All CILA agency employees are required to receive the following:

1) Developmentally appropriate training at hire and annually thereafter, that shall include, but not be limited to:

A) Crisis de-escalation;

B) Trauma-informed practices;

C) Behavior management practices; and

D) Alternatives to the use of restraint.

2) If the CILA agency is utilizing restraint, the CILA staff should receive developmentally appropriate training at hire and annually thereafter, that shall include, but not be limited to:

A) Restraint techniques;

B) Restrictive interventions;

C) Restorative practices; and

D) Identifying signs of distress during restraint.

3) If CILA agency staff are involved in restraint not identified in the Personal Plan, the CILA agency may require them to complete remediation training on restraint.

4) A copy of the CILA agency's policies on the use of restraint.

- e) Any individual, guardian, organization, or advocate may file a signed, written complaint with the Director of the Division of Developmental Disabilities, alleging that the CILA agency serving the individual has violated this Section.

(Source: Added at 47 Ill. Reg. _____, effective _____)

Section 115.250 Individual ~~Rights~~rights and ~~Confidentiality~~confidentiality

~~To ensure that individuals' rights are protected and that all services provided to individuals comply with the law, agencies licensed to certify CILAs shall assure that a written statement, in a language the individual understands, is given to each individual and guardian specifying the individual's rights. All individuals enrolled in the Medicaid DD Waiver shall be given a written copy of DHS Medicaid Home and Community Based Services DD Waiver, Rights of Individuals.~~

- a) The CILA agency~~Employees~~ shall share a copy and explain the contents of the most current Rights of Individuals form (IL 462-1201) with the individual and/or guardian when an individual enters the~~inform individuals entering a CILA and annually thereafter.~~program of the following:

- 1) The rights of individuals shall be protected in accordance with Chapter II of the Code except that the use of seclusion will not be permitted.
- 2) The right of individuals to confidentiality shall be governed by the Confidentiality Act.

- 3) Every individual and/or guardian has the right to:

A) Remain~~Their rights to remain~~ in a CILA unless the individuals voluntarily withdraw or meet the criteria set forth in Section 115.215;:-

B4) Contact~~Their right to contact~~ the Guardianship and Advocacy Commission, Equip for Equality, Inc., the Department's Office of Inspector General, the CILA agency's human rights committee and the Department. Employees shall offer assistance to individuals in contacting these groups giving each individual the address and telephone number of the Guardianship and Advocacy Commission, the Department's Office of Inspector General, the Department, and Equip for Equality, Inc.

C5) Be ~~Every individual receiving CILA services has the right to be~~ free from abuse, ~~and~~ neglect, exploitation, coercion, and Restraint.

Restraint is not permitted unless it follows the requirements specified in Section 115.245.

D) Seclusion, time-out, aversive procedures, or any similar actions are prohibited.

46) Individuals or guardians shall be permitted to purchase and use the services of private physicians and other mental health and developmental disabilities professionals of their choice, which shall be documented in the ~~services~~ plan.

b) ~~Provider~~Employee advisement of the individual's rights and justification for any restriction of individual rights shall be documented in the individual's record. For individuals in the Medicaid HCBS Waiver, any modification of additional conditions that restrict an individual's rights related to provider-owned or controlled living arrangement must be supported by a specific assessed need, be justified in the Personal Plan, and be documented in the Personal Plan as specified in subsection 115.200(c)(7)(F)(i) through (viii).

c) Individuals or guardians shall be permitted to present grievances and to appeal adverse decisions of the CILA agency and other service providers up to and including the authorized CILA agency representative. The CILA agency representative's decision on the grievance shall be subject to review in accordance with the Administrative Review Law [735 ILCS 5/Art. III]. For all individuals enrolled in the DDD Medicaid HCBS~~DD~~ Waiver, their rights to notices of action, appeals and fair hearings~~present grievances and to appeal adverse decisions of the agency~~ are detailed in 59 Ill. Adm. Code 120.

d) Individuals shall not be denied, suspended, or terminated from services or have services reduced for exercising any of their rights.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

SUBPART C: GENERAL AGENCY REQUIREMENTS

Section 115.300 Environmental Management~~management~~ of Living Arrangements~~living arrangements~~

a) For individuals who receive intermittent supervision and supports and choose to reside with their families or in living arrangements owned or leased by the individuals living there, the licensed CILA agency shall assist individuals in ~~selecting~~, obtaining and maintaining CILAs which afford safety and basic comfort. This~~Such~~ assistance shall include, but is not limited to:

- 1) Performing visual inspections;
 - 2) Purchasing and maintaining in working order safety devices; ~~(e.g. i.e.,~~ smoke and carbon monoxide detectors, first aid kits, door locks), when needed; ~~and~~
 - 3) Encouraging landlords to comply~~Advocacy with the landlord to encourage compliance~~ with applicable building and safety codes; ~~and~~;
 - 4) Providing education and information on fire safety and disaster preparedness procedures.
- b) For individuals who choose to reside in a provider-owned or controlled CILA~~living arrangements owned or leased by an agency~~, the licensed CILA agency shall ensure~~insure~~ that buildings containing owned or leased living arrangements shall comply with locally adopted building codes (including those for attic spaces and impractical evacuation capability) as enforced by local authorities; ~~and~~ the applicable editions and chapters ~~of the editions~~ of the NFPA 101, Life Safety Code (National Fire Protection Association, 2015~~1994~~), as cited in the rules of the Office of the State Fire Marshal (OSFM) at 41 Ill. Adm. Code 100; and any local fire codes that are more stringent than the NFPA as enforced by local authorities or OSFM~~the Office of the State Fire Marshal~~. A CILA~~An~~ agency shall make available the report of an inspection ~~that has been made~~ by the local authorities or OSFM~~the Office of the State Fire Marshal~~ prior to providing services to any individual in any CILA site. Non-compliance may be shown by evidence of administrative or judicial action taken against the owners of a building for violations of the applicable housing code within the previous two months, or a letter indicating non-compliance with NFPA requirements from the local authorities or OSFM~~the Office of the State Fire Marshal~~.
- c) Each living arrangement shall meet the most current standards as identified in local life/safety and building codes. Living arrangements specified in subsection (b) ~~of this Section~~ shall also meet the following additional standards:
- 1) Each living arrangement shall have a smoke detection system which complies with the Smoke Detector Act [425 ILCS 65].
 - 2) Each living arrangement shall have a carbon monoxide alarm which complies with the Carbon Monoxide Alarm Detector Act [430 ILCS 135].
 - 32) No more than eight individuals shall be served in any site.

- 43) There shall be documentation completed and maintained at the CILA agency, verifying that living arrangements are inspected quarterly by the licensed CILA agency to ensure~~insure~~ safety, basic comfort, and compliance with this Part.
- 54) Bath and toilet rooms
- A) At least one bathroom shall be provided for each four individuals. A bathroom shall include a toilet, lavatory, and tub or shower.
- B) Bathrooms shall be located and equipped to facilitate independence. When needed by the individual, special assistance or devices shall be provided.
- C) Bathing and toilet facilities shall provide privacy.
- 65) Bedrooms
- A) Each single individual bedroom shall have at least 75 square feet of net floor area, not including space for closets, wardrobes, bathrooms, and clearly definable entryway areas.
- B) Each multiple bedroom shall accommodate no more than two individuals and each bedroom for two individuals shall have at least 55 square feet of net floor area per individual, not including space for closets, wardrobes, bathrooms, and clearly definable entryway areas.
- C) Storage space for clothing and other personal belongings shall be provided for each individual.
- D) Each bedroom shall have:
- i) Walls that extend from floor to ceiling;
- ii) A ~~fire-graded~~ mattress and box spring that is suitable to the size of the individual which provides support and comfort, if beds are provided by the CILA agency;
- iii) At least one outside window; and
- iv) Electrical light sufficient for reading ~~(a minimum of 40 footcandles).~~

- 2787
- 2788 E) Bedrooms shall maintain a dry and comfortable environment.
- 2789
- 2790 F) In living arrangements where more than one individual resides,
- 2791 traffic to and from any room shall not be through an individual's
- 2792 bedroom.
- 2793
- 2794 G) In a provider-owned or controlled CILA, in addition to the
- 2795 qualities at 42 CFR 441.301(c)(4)(i) through (iv), the following
- 2796 additional conditions must be met concerning an individual's
- 2797 bedroom:
- 2798
- 2799 i) Each individual has privacy in their bedroom;
- 2800
- 2801 ii) Bedrooms have entrance doors that are lockable by the
- 2802 individual from inside the room, with only the individual
- 2803 and appropriate staff having keys to doors;
- 2804
- 2805 iii) Individuals sharing bedrooms have a choice of whom to
- 2806 share a bedroom with;
- 2807
- 2808 iv) Individuals have the freedom to furnish and decorate their
- 2809 bedroom within the lease or other agreement; and
- 2810
- 2811 v) The bedroom is physically accessible to the individual.
- 2812
- 2813 H) Any modification of the additional conditions, under subsection
- 2814 (G), must be addressed according to Section 115.200(c)(7)(F)(i)
- 2815 through (viii).
- 2816
- 2817 D) Pursuant to 210 ILCS 165, and as outlined by DDD, a CILA
- 2818 provider shall permit individuals who reside in a CILA to conduct
- 2819 authorized electronic monitoring of their bedroom through the use
- 2820 of electronic monitoring devices placed in the room.
- 2821
- 2822 i) CILA agencies shall not intentionally retaliate or
- 2823 discriminate against an individual for consenting to
- 2824 authorized electronic monitoring under the Authorized
- 2825 Electronic Monitoring in Community Integrated Living
- 2826 Arrangements and Developmental Disability Facilities Act
- 2827 [210 ILCS 135/14.5(b)(1)].
- 2828
- 2829 ii) CILA agencies shall not prevent the installation or use of

an electronic monitoring device by an individual who resides in a developmental disability CILA and has provided the staff of the CILA with notice and consent as required by 210 ILCS 165/20 [210 ILCS 135/14.5(b)(2)].

76) The CILA agency shall ensure that:

A) Each living arrangement will be physically accessible and accommodate other forms of accessibility if required by the needs of any individual served in the setting.

B~~A~~) Each living arrangement~~Living arrangements~~ shall be safe and clean ~~within common areas and within apartments over which the agency has control.~~

C~~B~~) Each living arrangement~~Living arrangements~~ shall be free from vermin.

D~~E~~) Waste and garbage shall be stored with a proper fitting lid, transferred, and disposed of (both interior and exterior) in a manner that does not permit the transmission of diseases.

E) Following a snowfall, freezing rain, or sleet, snow and ice must be cleared from sidewalks, ramps, and driveways of the living arrangement to provide safe and accessible passage.

F) Each living arrangement must maintain vegetative growth (including grass, bushes, trees) on the premises, not allowing it or weeds to become overgrown and/or hazardous.

G~~D~~) Private water systems shall comply with 77 Ill. Adm. Code 900 (Drinking Water Systems Code).

H) Each living arrangement shall evaluate the quality of the food prior to its consumption. Manufacturers provide dating to help consumers and retailers decide when food is of best quality. Each CILA site should have a written policy on fresh, frozen, and pantry foods with acceptable dates. Food should be dated when frozen, opened, etc. to determine whether it is safe to consume.

I~~E~~) Copies of inspections when performed by local and State inspectors in regard to health, sanitation and environment shall be maintained.

- 87) The CILA agency shall develop, implement, and maintain a disaster preparedness plan which shall include disasters and/or public health crises, be reviewed annually and, revised as necessary, and ensure that:
- A) Records and reports of fire and disaster training are made available to DDD and BALC while at the CILA site~~maintained~~;
 - B) A record of actions taken to correct noted deficiencies in disaster drills or inspections is maintained;
 - C) Employees and any other person, compensated or in a volunteer capacity, with responsibility for individuals served know how to react to fire, severe weather, missing persons, psychiatric and medical emergencies, poison control and deaths;
 - D) Individuals know how to react to situations identified in subsection (c)(~~87~~)(C) of this Section or are receiving training;
 - E) Employees and any other person, compensated or in a volunteer capacity, with responsibility for individuals served are trained in the location of fire-~~extinguishers~~fighting equipment, first aid kits, evacuation routes and procedures; and
 - F) ~~An operational~~A telephone that is accessible to individuals and staff, is available with a list stating the telephone ~~number~~numbers of the CILA site, the nearest poison control center, the local police, the local fire department, the Department's Office of Inspector General (OIG), and emergency medical personnel or an indication that 911 is the appropriate number to call.
- 98) The CILA agency shall implement procedures for evacuation which ensure that:
- A) ~~Drills~~Evacuation drills are conducted at a frequency determined by the CILA agency to be appropriate, based on the needs and abilities of individuals served by the particular living arrangement, but no less than annually on each shift, including overnight. Individuals who are new to the home must be trained within 30 days of moving into the home~~annually~~. One of these drills shall be during sleeping hours.
 - B) Evacuation drills must be conducted in a safe manner. Using

windows as a second means of egress is prohibited above the first floor unless using a semi-permanent fixture.

CB) Special provisions shall be made for those individuals who cannot evacuate the building without assistance, including those with physical disabilities and individuals who are deaf and/or blind.

DE) All employees are trained to carry out and properly document their assigned evacuation tasks.

ED) Inefficiency or problems identified during an evacuation drill shall result in specific corrective action.

FE) Evacuation drills shall include actual evacuation of individuals to designated safe areas.

109) At least one approved fire extinguisher shall be available in the residence, with tags verifying annual inspection~~inspected annually~~ and recharged when necessary.

1140) First aid kits that meet the basic American Red Cross standards shall be available in the CILA home. First aid kits shall be~~and~~ monitored quarterly and replenished as needed~~regularly~~ by the CILA agency.

d) For individuals who receive continuous supervision and support and choose to reside with their families or in living arrangements owned or leased by the individuals living there, the licensed CILA agency shall ensure that the living arrangements comply with all the requirements of subsection (c)~~of this Section~~ except subsections (c)(~~5~~4)(A) and (C), (c)(6)(A), (C), and (D), and (c)(8)(B) and (E)(~~5~~), (6)(B), (6)(D), (7)(B), (7)(E) and (10). Employees and any other persons compensated or in a volunteer capacity who have responsibility for individuals served shall be trained in the location of a fire extinguisher, first aid supplies, evacuation routes, and procedures. CILA agencies shall support the individual to ensure the residence is maintained and complies with local building codes as enforced by local authorities.

e) Prior to a new site owned or leased by the CILA agency being occupied and prior to a host family~~foster care~~ site accepting individuals receiving services, the site must be inspected~~reviewed~~ by BALCOALC and determined to be in compliance with this Part. Site inspections~~reviews~~ will be completed within 15~~10~~ working days after all necessary documentation has been received, e.g., current fire clearances. All sites as described in this subsection will be inspected~~reviewed~~ at least once during the two~~three~~ year period of licensure to determine on-going

compliance with this Part.

- f) The CILA provider shall cooperate with BALC to visit and inspect any home in which individuals enrolled in the CILA program are residing, regardless of whether it provides continuous or intermittent supervision or is individual or provider-owned or leased.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.310 Geographic ~~Location~~location of Community-Integrated Living Arrangements~~community-integrated living arrangements~~

- a) Provider-owned or controlled CILA sites shall be located to enable individuals to participate in and be integrated into their community and neighborhood. Homes shall be typical of homes in the community and residential neighborhood and their inclusion should not appreciably alter the characteristics of the neighborhood.
- b) Provider-owned or controlled CILA sites shall be located to promote integration of individuals with developmental~~mental~~ disabilities within the range of communities throughout the State,~~and to avoid concentrating individuals in CILAs in a neighborhood or community.~~
- c) Provider-owned or controlled CILA sites shall operate according to 42 CFR 441.301(c)(4) and related CMS guidance.
- ~~de)~~ CILAs owned or controlled~~leased~~ by a CILA agency~~an agency~~ and funded by the Department shall comply with all of the following requirements:~~not be located within a distance of 800 feet, measured via the most direct driving route, from any other setting licensed or funded to provide residential services for persons with a developmental disability or mental illness.~~
- 1) Current provider-owned or controlled CILAs shall be reviewed and evaluated for isolating characteristics. The provider-owned or controlled CILA shall not have the effect of isolating individuals receiving Medicaid HCBS Waiver services from the broader community of individuals not receiving Medicaid HCBS Waiver services.
 - 2) Any provider-owned or controlled CILA for individuals in the Medicaid DDD Waiver that has the effect of isolating individuals receiving Medicaid HCBS service and is operational during the transition period established by the federal government shall be designated by the Department for a heightened scrutiny review to determine whether it meets the qualities of home and community-based settings listed in 42

CFR 441.301(c)(4). The Department may perform heightened scrutiny reviews in accordance with federal rules and related guidance. The following factors shall be taken into account in determining whether a setting may have the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving HCBS:

A) Due to the design or model of service provision in the setting, individuals have limited, if any, opportunities for interaction in and with the broader community, including with individuals not receiving Medicaid-funded HCBS. Such opportunities, as well as identified supports to provide access to and participation in the broader community, should be reflected in both individuals' person-centered plans and the policies and practices of the setting;

B) The setting restricts individual choice to receive services or to engage in activities outside of the setting; or

C) The setting is physically located separate and apart from the broader community and does not facilitate individual opportunity to access the broader community and participate in community services, consistent with an individual's person-centered plan.

3) Settings must be validated by the State as in compliance with federal settings rules by March 17, 2023. Ongoing compliance with the Settings Rules will be incorporated into ongoing reviews and surveys.

e) When CILA providers own or control units in~~an agency owns or leases~~ a multi-unit building, CILA providers should recognize and consider the number of CILA and non-CILA residents located in the same building and, in order to meet the right of individuals with disabilities to live in the most integrated environment possible, strive to have an integrated grouping of people in any building composed of a mix of both CILA and non-CILA residents. No~~or owns or leases units within a multi-unit building, no~~ more than 25% of the total units~~8 individuals shall reside in CILAs owned or leased by an agency~~ in each building are CILAs funded by the Department and owned or controlled by CILA providers. Each unit must meet the requirements for a CILA as defined in Section 115.300~~These location requirements may not apply to sites in existence on August 13, 1999. Agencies with such sites may request waiver of these requirements. Any such request must be submitted in writing to OALC and will be reviewed based upon the citation in Section 115.310(e).~~

- f) Any new provider-owned or controlled CILA site for individuals in the DDD Medicaid HCBS Waiver must comply with the federal settings rules' requirements and shall only be eligible for funding from the Department if:
- 1) It is not adjacent to (next to, across, or diagonal from or immediately behind) any Medicaid HCBS waiver-funded residential or day program site or property owned or controlled by the same CILA provider;
 - 2) It is not located in a building that is also a publicly or privately-operated facility that provides inpatient institutional treatment;
 - 3) It is not located in a building on the grounds of, or adjacent to, a publicly or privately-operated facility that provides inpatient institutional treatment; or
 - 4) It is not any of the settings defined in 42 CFR 441.301(c)(5).
- g) New provider-owned or controlled CILAs must be in compliance with the settings rules when they are licensed.
- h) Individuals in individually owned or controlled homes and apartments in which the individual receiving Medicaid HCBS Waiver services lives independently or with family members, friends, or roommates are presumed to be in compliance with the regulatory criteria of a home and community-based setting. Settings where the individual lives in a private residence owned by an unrelated caregiver (who is paid for providing HCBS to the individual) are considered provider-owned or controlled settings and will be evaluated as such.
- ~~i) A proximity waiver can be requested from DDD for HCBS adult waiver funded residential sites converting to CILA sites. Nothing in this Part shall be construed to interfere with the right of individuals with mental disabilities to choose where they rent or buy housing.~~
- ~~e) If an agency requests a waiver of Section 115.310(e), the agency shall present to the Department its rationale for the waiver request, including evidence of efforts to comply with Section 115.310(e). The request must be submitted before the agency leases, purchases or takes possession of the property to be used as a CILA or in the case of any agency having possession of the property, before the property is used as a CILA site. The Department shall grant the waiver for the duration of the CILA if it determines that the granting of the waiver would meet the following criteria:~~
- ~~1) It is consistent with the goal of community integration of individuals with~~

~~disabilities in that the requested arrangement promotes, or at least does not diminish, individuals' opportunities and probabilities of interacting with neighbors without a disability and otherwise participating in neighborhood and community activities;~~

2) ~~It is consistent with Section 115.310(a), (b) and (d); and~~

3) ~~In the case of CILA sites existing prior to August 13, 1999, impact on individuals currently residing there caused by relocating can be shown to be negative.~~

f) ~~The Department shall issue a decision on waivers requested under subsection (d) of this Section within five working days after receipt of the written request.~~

g) ~~If the Department denies a waiver request, the agency may request a hearing in accordance with Section 115.470. At the hearing, the Department shall have the burden of proving that there was substantial evidence to support the decision to deny the waiver.~~

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.320 Administrative Requirements~~requirements~~

a) Governing body

1) Each CILA provider~~agency~~ which is owned or operated by any corporation, association, or unit of local government shall have a governing body in which is vested authority and responsibility for the organization, management, control, and operation of the CILA agency and all programs, services, facilities, and residences it administers.

2) Each CILA provider~~agency~~ shall have provisions for obtaining input from individuals served, guardians~~consumers~~ and/or individual's~~consumer~~ representatives to the governing body.

b) Staffing

1) Mental health and developmental disabilities employees shall be licensed or certified as required by Illinois laws.

2) When paraprofessional, non-professional contractual workers or volunteers~~or untrained employees~~ are used in direct services, they shall be supervised in the provision of services by professional employees.

- 3) A CILA provider~~An agency~~ shall not employ an individual (including contractual workers, volunteers, or practitioners who have the responsibility of caring for individuals) in any capacity, until the CILA provider~~agency~~ has conducted the following registry checks concerning the potential employee, contractor/subcontractor, volunteer, or practitioner:~~inquired of the Department of Public Health as to information in the Nurse Aid Registry concerning the individual. If the Registry has information of a substantiated finding of abuse or neglect against the individual, the agency shall not employ him or her in any capacity.~~
- A) Department of Public Health (DPH) Health Care Worker Registry
 - B) Department of Children and Family Services (DCFS) State Central Register/Child Abuse and Neglect Tracking System (CANTS)
 - C) Illinois Sex Offender Registry
 - D) Illinois Department of Healthcare and Family Services (HFS) Sanctions List (maintained at the HFS Office of Inspector General website, <https://www.illinois.gov/hfs/oig/Pages/SanctionsList.aspx>)
- 4) A CILA provider shall not employ an individual (including contractual workers, volunteers, or practitioners who have the responsibility of caring for individuals) in any capacity until the CILA provider has inquired of and received the results from the applicable registry or list concerning the potential employee, contractor/subcontractor, volunteer, or practitioner. Inquiries shall not occur more than 30 calendar days prior to the first day of employment.
- 5) If the DPH, DCFS, or Illinois Sex Offender registries contain information concerning the potential employee, contractor/subcontractor, volunteer, or practitioner that indicates a finding of physical or sexual abuse or egregious neglect, a substantiated case of child abuse or neglect, a sex offense, or a disqualifying criminal conviction from which there is no waiver, the CILA provider shall not employ that person in any capacity. If the HFS Sanctions List indicates that the potential employee, contractor/subcontractor, volunteer, or practitioner has been terminated, suspended, barred, or otherwise excluded from the Illinois Medical Assistance Program, the CILA provider shall confirm that person or entity's status with the HFS OIG.

- 6) CILA providers shall make annual inquiries to the DPH, DCFS, and Illinois Sex Offender registries and the HFS Sanctions List concerning each current employee, volunteer, contractual worker, subcontractor, or licensed practitioner. If the annual check discloses that the individual or entity's name has been placed on the registry or list, that individual or entity must be terminated. The CILA provider must establish a schedule that results in completion of checks every full year (365 calendar days), which can be accomplished by:
 - A) Repeating the check on the anniversary of the employee's, contractor's/subcontractor's, volunteer's, or practitioner's hiring;
 - B) Repeating the check when the employee's, contractor's/subcontractor's, volunteer's, or practitioner's annual performance evaluation is due; or
 - C) Creating a specific schedule of checks to ensure timely completion.
- 7) The CILA provider must comply with the Health Care Worker Background Check Act [225 ILCS 46]. A CILA provider shall not knowingly hire or retain any person outside of the provisions of the Health Care Worker Background Check Act.
- 8) A person listed on the Health Care Worker Registry may request a waiver of the prohibition against employment by completing an application on a form prescribed by DPH in accordance with the Health Care Worker Background Check Act.
- 9) A waiver of an indication on the CANTS Register may be requested by completing an application per the guidelines issued and published by the Department.

- c) General program requirements
CILA agencies~~Agencies~~ funded by the Department shall meet the following general program requirements for all funded services:

- ~~1)~~ ~~Service setting~~
~~Services shall be provided in the setting most appropriate to the needs of and reflecting the preferences of the individual. This may include the individual's home, the agency, or the community. All settings shall be used innovatively in order to reach the target populations.~~
- 12) Recordkeeping

~~A)~~ Cumulative case records including a Personal Plan and Implementation Strategy~~an individualized service plan~~ shall be maintained for each individual.

~~B)~~ ~~The individualized service plan shall state the goals for each individual. The individual shall be afforded the opportunity and encouraged to participate in goal/objective selection. Goals/objectives shall include timeframes specified by the agency's professional employees, in consultation with the individual and relevant collaterals. "Individualized service plan", as used herein, refers to and is equivalent to "individual treatment plan" and "individual habilitation plan".~~

23) Behavior management and human rights review

A) Each CILA agency is required to have a Human Rights Committee that will establish or ensure a process for the periodic review of ~~behavior intervention and~~ human rights issues involved in the individual's services and supports. A program which uses behavioral interventions as specified in Section 115.214 for managing maladaptive behavior shall also establish a Behavior Management Committee. Each Committee must have at least five members. Members shall not be shared between committees with the exception of a physician, advanced practice registered nurse, registered professional nurse, or nurse practitioner/physician assistant. ~~treatment and/or habilitation. Agencies required to have behavior intervention and human rights review policies and procedures under licensure or certification standards shall continue to comply with those standards.~~

B) The Human Rights Committee shall:

- i) Review at least annually the CILA provider policies, procedures and practices which have the potential to restrict the rights of individuals;
- ii) Review at least every six months practices which restrict a specific individual's rights;
- iii) Inform the CILA agency of any complaints involving an individual's rights, deficiencies, and any corrective actions;

- iv) Ensure that individuals, guardians, and natural supports as desired by the individual are included in the meetings in which their services and supports are discussed. The Committee shall also ensure that individuals are assisted to have meaningful interactions and are accommodated as necessary during the meetings; and
- v) Maintain minutes, including attendance, and a record of decisions made per individual including justification of decisions and intended outcomes. When the committee approves restrictive interventions, the minutes must include the next review date.

C) The Human Rights Committee shall include:

- i) At least 5 members.
- ii) At least one person receiving services from the agency and/or the individual's family member or guardian.
- iii) At least one-third of the members cannot be former employees of the CILA provider, individuals receiving services or guardians of individuals formerly served by the CILA provider, a vendor providing products or services to the CILA provider, or employees from other CILA providers or DD programs.

D) A Behavior Management Committee shall:

- i) Approve behavior interventions prior to their implementation and review those interventions at least every six months;
- ii) Review all behavior strategies at least annually and determine if a rights restriction exists. Plans that are found to have a rights restriction must also be reviewed by the CILA agency's Human Rights Committee;
- iii) Maintain minutes, including attendance and a record of decisions made; and
- iv) Seek input from individuals, guardians, and natural supports as desired by the individual whose services and

supports are discussed. The Committee shall also ensure that individuals are assisted to have meaningful input and are accommodated as necessary.

E) A Behavior Management Committee shall be comprised in the following manner:

- i) Members shall include persons qualified to evaluate the appropriateness of the proposed behavior management interventions.
- ii) When drugs to manage behavior are used, a licensed professional qualified to evaluate their use shall be a member of the committee.
- iii) At least one member shall be from outside the CILA agency.

34) Abuse, ~~and~~ neglect, and exploitation

- A) Each CILA agency shall have and use a process for reporting and handling instances of abuse, ~~and~~ neglect, and exploitation in accordance with applicable standards, regulations and laws that shall include notification of the individual allegedly abused, ~~or neglected-neglected, or exploited~~ and ~~their~~his or her guardian or parent of the allegation within 24 hours after receiving the allegation.
- B) In addition to abuse, neglect, and exploitation, each CILA agency shall have and use a process for reporting and handling complaints regarding Individual Rights. The CILA agency shall share a copy of the Rights of Individuals form [IL 462-1201] with the individual and/or guardian when an individual enters the CILA program (see Section 115.250(a)).

45) Admission ~~requirements to programming~~

- A) CILA agencies ~~Agencies~~ shall not discriminate in the admission to and provision of needed services to individuals on the basis of race, color, sex, religion, ~~(creed)~~, gender identity, gender expression, age, national origin (ancestry), ethnicity, disability, marital status, sexual orientation or military status in any of their activities or operations ~~national origin, ancestry, or disability~~.

B) Admission policies and procedures shall be set forth in writing and be available for review.

56) Compliance with life safety standards and requirements
All program facilities shall be in compliance with applicable State licensure requirements and local ordinances with regard to fire, building, zoning, sanitation, health, and safety requirements.

~~7)~~ ~~Personnel requirements~~

~~A) A licensed physician (MD or DO) shall assume medical and legal responsibility for medical services offered in any program, including prescription of medications.~~

~~B) All services shall be provided by appropriately trained employees, operating under the supervision of qualified clinical professionals.~~

~~8)~~ ~~Mandated services~~

~~A) Mandated services shall be provided according to the requirements as stated in the Department's rules at 59 Ill. Adm. Code 125 (Recipient Discharge/Linkage/Aftercare).~~

~~B) The Department shall monitor the provision of mandated follow-up monitoring services as outlined in 59 Ill. Adm. Code 125.~~

~~9)~~ ~~Utilization review~~

~~Utilization review is the ongoing review of services delivered, their intensity and their duration, to determine adherence to generally accepted guidelines or standards regarding the individual's assessment, eligibility for service and appropriateness of services rendered. Agencies shall engage in a utilization review process for all program services.~~

610) Visits to programs

The CILA agency shall ensure that Department-authorized individual protection and advocacy ~~consumer~~-interest groups shall be permitted, with the consent of the individual or guardian~~individuals~~, to visit provider-owned or controlled~~agencies and~~ living arrangements ~~owned or leased by an agency~~.

7) Remote Monitoring and Supports

CILA agencies may provide remote monitoring and support services in

community-integrated living arrangements pursuant to 305 ILCS 5/12-21.21, as determined by DDD. Remote monitoring and supports (i.e., video, web-cameras, or other interactive technology) may be provided to increase independence and daily living skills of an individual and address an individual's needs and outcomes identified in their personal plan. Remote supports and services must be based on an assessment which shall, at a minimum, identify risks important in considering whether remote monitoring and supports are appropriate for the individual.

d) Training

- 1) Direct service ~~professionals~~~~employees~~ and any other ~~compensated~~ persons (paraprofessional, contractual workers, or volunteers) with responsibility for direct care of individuals served shall demonstrate competence in training areas listed in subsections (d)(1)(A) through (M) as a part of an orientation program. Anyone specified in this subsection (d)(1) without previous experience in direct service to individuals shall receive training and demonstrate competence prior to unsupervised responsibility for direct service unless trained employees are on site and available for on-the-job training. Direct service professionals and other persons~~providers~~ as specified above who have completed training in the below mentioned areas, and demonstrated competence as documented in their personnel records, shall not be required to repeat that training as part of their orientation. Anyone specified in this subsection (d)(1) who has not demonstrated competence shall receive training until he or she can demonstrate competence in the following areas, as recorded in their~~his or her~~ records. All direct service employees and any other compensated persons, regardless of staffing model, shall receive training and demonstrate competence as documented in employee records in the following training areas:

- A) Cardiopulmonary resuscitation (CPR), back blows/abdominal thrusts,~~Heimlich maneuver~~ and first aid;
- B) Concepts of ~~treatment~~, habilitation and rehabilitation including behavior intervention and management, ~~normalization~~, age appropriateness and psycho-social rehabilitation depending on the needs of the individuals served or to be served;
- C) Safety,~~fire~~, and disaster procedures; public health emergencies; and fire procedures and the use of fire equipment such as a fire extinguisher;

- D) Abuse, neglect, exploitation, coercion and critical~~unusual~~ incident prevention, handling and reporting to the DHS OIG (pursuant to 59 Ill. Adm. Code 50);
- E) Individual rights in accordance with Section 115.250~~Chapter II of the Code~~ and maintaining confidentiality in accordance with the Mental Health and Developmental Disabilities Confidentiality Act [740 ILCS 100];
- F) The purpose and content~~nature and structure~~ of the Personal Plan pursuant to 42 CFR 441.301(c)(2)~~individual integrated services plan~~;
- G) Development and implementation of an Implementation Strategy;
- ~~H~~G) The type, dosage, characteristics, effects, and side effects of medications prescribed for individuals. The CILA agency shall ensure~~assure~~ that there is sufficient training in this area to provide coverage during expected and unexpected absences of caregivers by others who have been determined competent;
- ~~I~~H) Observation, using the AIMS (Abnormal Involuntary Movement Skills), of~~Screening for~~ involuntary muscular movement, which may be indicative of tardive dyskinesia;
- ~~I~~J) ~~Development and implementation of an individual integrated services plan~~;
- ~~J~~K) ~~Formal assessment instruments used and their role in the development of the services plan~~;
- ~~J~~K) Documentation and recordkeeping requirements with reference to the Personal Plan and Implementation Strategy~~services plan~~;
- ~~K~~L) Other training which relates specifically to the type of disability or treatment and intervention techniques being used specific to individuals living in CILAs, geared toward assisting employees to execute outcomes stated~~objectives obtained~~ in the Personal Plans and Implementation Strategies~~services plans~~;
- ~~L~~M) The techniques associated with monitoring and regulating hot water temperatures prior to and during an individual's use to ensure safe hand-washing, hair-washing, bathing, and showering

procedures. Water temperatures should be between 100 and 110 degrees to ensure safety; and

~~MN~~) In CILA programs for ~~individuals~~~~persons~~ with developmental disabilities, all unlicensed, direct care employees, prior to assuming responsibility for supervising the self-administration of medication training programs or for administration of medications for persons with developmental disabilities, shall meet criteria set forth in 59 Ill. Adm. Code 116.40(c) including, but not limited to, successful completion of,~~will successfully complete~~ a Department approved training program provided by a ~~CILA~~~~an~~ agency Nurse-Trainer ~~pursuant to 59 Ill. Adm. Code 116.~~ Authorized direct care staff shall be re-evaluated by a Nurse-Trainer at least annually or more frequently at the discretion of the registered professional nurse. Any retraining shall be to the extent that is necessary to ensure competency of the authorized direct care staff to administer medication (see 59 Ill. Adm. Code 116.40).

i) ~~All agency Nurse-Trainers will be registered professional nurses.~~

ii) ~~All agency Nurse-Trainers will be trained by the Department's Master Nurse-Trainer.~~

2) After completion of training specified in subsection (d)(1)~~-of this Section~~, each direct service employee shall participate in ongoing employee development activities as outlined in the CILA agency's employee development plan.

3) All training shall be documented and shall be readily available for review by BALC and DDD~~Department surveyors~~.

4) The CILA agency shall implement a written training plan which lists training to be offered to meet the requirements of this Part, the methods used for completion of any required training, and the process used to determine competency.

e) Volunteer training
The CILA agency shall provide an orientation and training program for volunteers specific to volunteer duties and shall provide supervision as necessary. Volunteers with responsibility for care of individuals served must complete and demonstrate competency in the training areas specified in subsection (d)~~-above~~.

f) Quality assurance

- 1) There shall be a written quality assurance plan and ongoing activities designed to review and evaluate services to individuals and; operation of programs and to resolve identified problems.
- 2) The CILA agency's quality assurance program shall be the basis for determining under its license~~annually certifying to the Department~~ that individuals are receiving appropriate community-based services consistent with their Personal Plans and Implementation Strategies and~~services plans~~, that all programs and services are supervised by the CILA agency and comply with this Part.
 - A) If a certified CILA does not continue to meet standards, the CILA agency shall correct deficiencies within 30 days.~~;~~~~or~~
 - B) If deficiencies in a certified CILA cannot be corrected within 30 days, the CILA agency shall withdraw certification of the CILA program in question and notify the Department. The CILA agency shall remain responsible for those individuals who live in or lived in the affected CILA until the individuals have transitioned to other settings.

g) Critical~~Unusual~~ incidents

- 1) The CILA agency shall have written policies and procedures for handling, investigating, reporting, tracking, and analyzing critical~~unusual~~ incidents through the CILA agency's management structure, up to and including the authorized CILA agency representative. The CILA agency shall ensure that employees demonstrate their knowledge of, and follow, such policies and procedures. ~~Unusual incidents shall include, but are not limited to, the following:~~
 - A) ~~Sexual assault;~~
 - B) ~~Abuse or neglect;~~
 - C) ~~Death;~~
 - D) ~~Physical injury;~~
 - E) ~~Assault;~~

F) ~~Missing persons;~~

G) ~~Theft; and~~

H) ~~Criminal conduct.~~

2) Within 24 hours of occurrence the CILA agency shall report any incident which is subject to the Criminal Code of ~~2012~~¹⁹⁶¹ [720 ILCS 5] to the local law enforcement agencies.

3) The CILA agency shall ensure that suspected instances of abuse, ~~or~~ neglect or exploitation against individuals in programs which are licensed by the Department are reported to the Office of Inspector General (Section ~~1.176.2~~ of the Department of Human Services ~~Abused and Neglected Long Term Facility Residents Reporting~~ Act [~~20210~~ ILCS 1305/1-17(k)(1)~~30/6.2~~]) within four hours of discovery.

4) Incidents other than those required to be reported to the Office of Inspector General shall be electronically reported to the Department's Division of Developmental Disabilities through its Critical Incident Reporting and Analysis System (CIRAS) (<http://www.dhs.state.il.us/page.aspx?item=97101>). Incidents to be reported are specified in Section 115.120 under Critical Incidents.

h) Individuals' records

1) The CILA agency shall ensure the confidentiality of individuals' records in accordance with the Act and shall ensure safekeeping of all records against loss or destruction.

2) The CILA agency shall maintain a chronological record for each individual. Records shall be accessible~~located~~ at the program site at which individuals are being served.

A) Each entry shall be legible, dated and authenticated by the signature and title of the person making the entry.

B) Corrections shall be initialed and made in such a way as to leave the original incorrect entry legible.

C) When symbols or abbreviations are used, the CILA agency shall provide a legend to explain them which shall be standardized throughout the CILA agency.

- 3) On an individual's entry into the CILA agency, the following information shall be obtained, recorded, and updated as necessary in the individual's record:
- A) Identifying information including name, date of birth, sex, race, a copy of state ID, Medicaid number, birth certificate, when available, current photograph (if the individual consents to having their picture taken), social security number (this may be stored separately from the record if necessary to protect against identity theft), and legal status;
 - B) If applicable, the court appointed guardianship order;
 - ~~C~~B) The name, address and telephone number of the legal guardian or the person to be notified in case of an emergency;
 - ~~D~~E) The language spoken or understood by the individual including, in the case of an individual who is deaf or hard of hearing-~~impaired~~, the individual's preferred mode of communication, e.g., American sign language, signed English, aural, oral, or tactile communications device;
 - ~~E~~D) Prescribed medications, reactions and side effects to medications, allergies to foods, other medications, and substances;
 - ~~F~~E) Physical and dental examinations, and medical history;
 - ~~G~~F) Consent to receive emergency medical services; and
 - ~~H~~G) Copies of the authorization for release of information.
- 4) The following shall be entered in the individual's record during the period of service:
- A) Written informed consent by the individual or guardian to participate in a CILA;
 - B) Prior service history;
 - C) Personal Plan and Implementation Strategy as specified in Section 115.230;

- D) Assessments and reassessments as specified in Section 115.225;
- ~~E) Initial assessment and individual integrated services plan, and reassessments, and individual integrated services plan as described in Section 115.230;~~
- ~~ED)~~ Documentation of approval to use special procedures and the results of their use; and
- ~~FE)~~ Monthly documentation of ~~Progress notes, which shall be entered chronologically and at least monthly, documenting~~ the individual's progress towards the outcomes recorded in the Personal Plan and reflected in the Implementation Strategy. The documentation must be signed and dated by the QIDP ~~involvement in and response to the services plan.~~

5) Electronic signature or computer-generated signature codes are acceptable as authentication of record content.

- A) In order for a CILA ~~an~~ agency to employ electronic signatures or computer-generated signature codes for authentication purposes, the CILA agency must adopt a policy that permits authentication by electronic or computer-generated signature.
- B) At a minimum, the policy shall include adequate safeguards to ensure confidentiality of the codes, including, but not limited to, the following:
 - i) Each user must be assigned a unique identifier that is generated through a confidential access code.
 - ii) The CILA agency must certify in writing that each identifier is kept strictly confidential. This certification must include a commitment to terminate a user's use of a particular identifier if it is found that the identifier has been misused. "Misused" shall mean that the user has allowed another person or persons to use their ~~his or her~~ personally assigned identifier, or that the identifier has otherwise been inappropriately used.
 - iii) The user must certify in writing that the user ~~he or she~~ is the only person with user access to the identifier and the only person authorized to use the signature code.

iv) The CILA agency must monitor the use of identifiers periodically and take corrective action as needed. The process by which the CILA agency will conduct monitoring shall be described in the policy.

C) A system employing the use of electronic signatures or computer-generated signature codes for authentication shall include a verification process to ensure that the content of authenticated entries is accurate. The verification process shall include, at a minimum, the following provisions:

i) The system shall require completion of certain designated fields for each type of document before the document may be authenticated, with no blanks, gaps or obvious contradictory statements appearing within those designated fields. The system shall also require that correction or supplementation of previously authenticated entries shall be made by additional entries, separately authenticated, and made subsequent in time to the original entry.

ii) The system must make an opportunity available to the user to verify that the document is accurate and the signature has been properly recorded.

iii) The CILA agency must periodically sample records generated by the system to verify the accuracy and integrity of the system.

D) Each report generated by a user must be separately authenticated.

i) Financial and operational requirements
Agencies licensed to provide CILA services ~~CILAs~~ shall comply with Department rules regulating their contractual and financial relationship with the Department.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.321 Application for Waiver ~~waiver~~ of the Prohibition Against Employment ~~prohibition against employment~~

a) Hiring of direct care professionals ~~employees~~
A CILA ~~An~~ agency shall not *knowingly hire* or retain *any* person after January 1, 1998 in a full-time, part-time, volunteer or contractual direct care position if that

person has been convicted of committing or attempting to commit one or more of the following offenses outlined in Section 25 of the Health Care Worker Background Check Act [225 ILCS 46/25] unless the applicant or employee obtains a waiver pursuant to subsection (b). ~~subsections (i) through (l) of this Section (Section 25 of the Health Care Worker Background Check Act [225 ILCS 46/25])~~:

- ~~1) Murder, homicide, manslaughter or concealment of a homicidal death (Sections 9-1 through 9-3.3 of the Criminal Code of 1961 [720 ILCS 5/9-1 through 9-3.3]);~~
- ~~2) Solicitation of murder and solicitation of murder for hire (Sections 8-1.1 and 8-1.2 of the Criminal Code of 1961 [720 ILCS 5/8-1.1 and 8-1.2]);~~
- ~~3) Kidnaping or child abduction (Sections 10-1, 10-2, 10-5 and 10-7 of the Criminal Code of 1961 [720 ILCS 5/10-1, 10-2, 10-5 and 10-7]);~~
- ~~4) Unlawful restraint or forcible detention (Sections 10-3, 10-3.1 and 10-4 of the Criminal Code of 1961 [720 ILCS 5/10-3, 10-3.1 and 10-4]);~~
- ~~5) Assault, battery or infliction of great bodily harm (Sections 12-1, 12-2, 12-3, 12-3.1, 12-3.2, 12-4, 12-4.2, 12-4.3, 12-4.4, 12-6 and 12-7 of the Criminal Code of 1961 [720 ILCS 5/12-1, 12-2, 12-3, 12-3.1, 12-3.2, 12-4, 12-4.2, 12-4.3, 12-4.4, 12-6 and 12-7]);~~
- ~~6) Sexual assault or abuse (Sections 12-13, 12-14, 12-15 and 12-16 of the Criminal Code of 1961 [720 ILCS 5/12-13, 12-14, 12-15 and 12-16]);~~
- ~~7) Indecent solicitation of a child (Section 11-6 of the Criminal Code of 1961 [720 ILCS 5/11-6]);~~
- ~~8) Predatory criminal sexual assault of a child (Section 12-14.1 of the Criminal Code of 1961 [720 ILCS 5/12-14.1]);~~
- ~~9) Sexual exploitation of a child (Section 11-9.1 of the Criminal Code of 1961 [720 ILCS 5/11-9.1]);~~
- ~~10) Exploitation of a child (Section 11-19.2 of the Criminal Code of 1961 [720 ILCS 5/11-19.2]);~~
- ~~11) Child pornography (Section 11-20.1 of the Criminal Code of 1961 [720 ILCS 5/11-20.1]);~~

- 3774 12) ~~Endangering the life or health of a child (Section 12-21.6 of the Criminal~~
3775 ~~Code of 1961 [720 ILCS 5/12-21.6]);~~
- 3776
- 3777 13) ~~Cruelty to children (Section 53 of the Criminal Jurisprudence Act [720~~
3778 ~~ILCS 115/53, repealed by P.A. 89-234, effective January 1, 1996);~~
- 3779
- 3780 14) ~~Abuse or gross neglect of a long-term care facility resident (Section 12-19~~
3781 ~~of the Criminal Code of 1961 [720 ILCS 5/12-19]);~~
- 3782
- 3783 15) ~~Criminal neglect of an elderly or disabled person (Section 12-21 of the~~
3784 ~~Criminal Code of 1961 [720 ILCS 5/12-21]);~~
- 3785
- 3786 16) ~~Theft, financial exploitation of an elderly or disabled person, robbery or~~
3787 ~~burglary (Sections 16-1, 16-1.3, 16A-3, 18-1, 18-2, 19-1 and 19-3 of the~~
3788 ~~Criminal Code of 1961 [720 ILCS 5/16-1, 16-1.3, 16A-3, 18-1, 18-2, 19-1~~
3789 ~~and 19-3]);~~
- 3790
- 3791 17) ~~Aggravated robbery (Section 18-5 of the Criminal Code of 1961 [720~~
3792 ~~ILCS 5/18-5]);~~
- 3793
- 3794 18) ~~Criminal trespass (Section 19-4 of the Criminal Code of 1961 [720 ILCS~~
3795 ~~5/19-4]);~~
- 3796
- 3797 19) ~~Home invasion (Section 12-11 of the Criminal Code of 1961 [720 ILCS~~
3798 ~~5/12-11]);~~
- 3799
- 3800 20) ~~Arson (Sections 20-1 and 20-1.1 of the Criminal Code of 1961 [720 ILCS~~
3801 ~~5/20-1 and 20-1.1]);~~
- 3802
- 3803 21) ~~Unlawful use of weapons or aggravated discharge of a firearm (Sections~~
3804 ~~24-1 and 24-1.2 of the Criminal Code of 1961 [720 ILCS 5/24-1 and 24-~~
3805 ~~1.2]);~~
- 3806
- 3807 22) ~~Armed violence (Section 33A of the Criminal Code of 1961 [720 ILCS~~
3808 ~~5/33A]);~~
- 3809
- 3810 23) ~~Heinous battery (Section 12-4.1 of the Criminal Code of 1961 [720 ILCS~~
3811 ~~5/12-4.1]);~~
- 3812
- 3813 24) ~~Tampering with food, drugs or cosmetics (Section 12-4.5 of the Criminal~~
3814 ~~Code of 1961 [720 ILCS 5/12-4.5]);~~
- 3815
- 3816 25) ~~Aggravated stalking (Section 12-7.4 of the Criminal Code of 1961 [720~~

~~ILCS 12-7.4));~~

- ~~26) Ritual mutilation and ritualized abuse of a child (Section 12-32 and 12-33 of the Criminal Code of 1961 [720 ILCS 5/12-32 and 12-33]);~~
- ~~27) Forgery (Section 17-3 of the Criminal Code of 1961 [720 ILCS 5/17-3]);~~
- ~~28) Vehicular hijacking and aggravated vehicular hijacking (Sections 18-3 and 18-4 of the Criminal Code of 1961 [720 ILCS 5/18-3 and 18-4]);~~
- ~~29) Manufacture, delivery or trafficking of cannabis (Sections 5, 5.1 and 9 of the Cannabis Control Act [720 ILCS 550/5, 5.1 and 9]);~~
- ~~30) Delivery of cannabis on school grounds (Section 5.2 of the Cannabis Control Act [720 ILCS 550/5.2]);~~
- ~~31) Delivery of cannabis by a person at least 18 years of age to a person under 18 who is at least three years his or her junior (Section 7 of the Cannabis Control Act [720 ILCS 550/7]); and~~
- ~~32) Manufacture, delivery or trafficking of controlled substances (Sections 401, 401.1, 404, 405, 405.1, 407 and 407.1 of the Illinois Controlled Substances Act [720 ILCS 570/401, 401.1, 404, 405, 405.1, 407 and 407.1]);~~

b) **Definitions**

For the purposes of this Section, the following terms are defined:

~~"Applicant." A person seeking employment with an agency who has received a bona fide conditional offer of employment. (Section 15 of the Health Care Worker Background Check Act [225 ILCS 46/15])~~

~~"Conditional offer of employment." A bona fide offer of employment by an agency to an applicant, which is contingent on the receipt of a report from the Department of State Police indicating that the applicant does not have a record of conviction of any of the criminal offenses enumerated in subsections (a)(1) through (32) of this Section. (Section 15 of the Health Care Worker Background Check Act [225 ILCS 46/15])~~

~~"Direct care." The provision of nursing assistance with meals, dressing, movement, bathing, or other personal needs of maintenance, or general supervision and oversight of the physical and mental well-being of an individual who is incapable of maintaining a private, independent~~

~~residence or who is incapable of managing his or her person whether or not a guardian has been appointed for that individual. (Section 15 of the Health Care Worker Background Check Act [225 ILCS 46/15])~~

~~"Initiate." The obtaining of the authorization for a record check from a student, applicant, or employee. The provider shall transmit all necessary information and fees to the Illinois State Police within 10 working days after receipt of the authorization. (Section 15 of the Health Care Worker Background Check Act [225 ILCS 46/15])~~

~~"Nurse Aide Registry." The registry of nurse aides kept by the Department of Public Health pursuant to Section 3-206.01 of the Nursing Home Care Act [210 ILCS 45/3-206.01].~~

~~"UCIA" The Uniform Conviction Information Act [20 ILCS 2635].~~

- e) ~~Nurse Aide Registry~~
~~For all applicants for nurse aide positions, the agency shall check the Nurse Aide Registry to determine the date of the applicant's last UCIA criminal history record check. If it has been more than one year since the records check, the agency must initiate or have initiated on its behalf a UCIA criminal history record check for the nurse aide. (Section 30(b) of the Health Care Worker Background Check Act [225 ILCS 46/30(b)])~~
- d) ~~Conditional offers~~
~~Effective January 1, 1996, if the agency makes a conditional offer of employment to an applicant other than a nurse aide who is not exempt under subsection (m) of this Section for a direct care position, the provider shall initiate or have initiated on its behalf a UCIA criminal history record check except as provided for in subsection (e)(2) of this Section. (Section 30(c) of the Health Care Worker Background Check Act [225 ILCS 46/30(c)])~~
- e) ~~Initiation of UCIA criminal history record check~~
 - 1) ~~By January 1, 1997 the agency must initiate a UCIA criminal history record check for all direct care employees who were hired before January 1, 1996, who have not already had a UCIA criminal history record check and who are not exempt in accordance with subsection (m) of this Section. (Section 30 of the Health Care Worker Background Check Act [225 ILCS 46/30])~~
 - 2) ~~If the agency initiated a criminal background check on an employee hired after January 1, 1996 and before January 1, 1998, the agency does not~~

~~need to initiate an additional criminal history record check to determine if the employee has a record of conviction of any of the offenses enumerated in subsections (a)(2), (7), (9) through (13), (17), (19), (22) through (28), (30) and (31) of this Section. (Section 25.1 of the Health Care Worker Background Check Act [225 ILCS 46/25.1])~~

f) ~~Request for UCIA criminal history record check~~

~~The agency shall request the UCIA criminal history record check in accordance with the requirements of the Department of State Police. (See 20 Ill. Adm. Code 1265.) The agency shall notify the applicant or employee of the following whenever a non fingerprint UCIA Criminal History Record search is made. (Section 30 of the Health Care Worker Background Check Act [225 ILCS 46/30]):~~

- ~~1) That the agency shall request or have requested on its behalf a UCIA criminal history record check pursuant to the Health Care Worker Background Check Act;~~
- ~~2) That the applicant or employee has a right to obtain a copy of the criminal records report, challenge the accuracy and completeness of the report and request a waiver in accordance with subsection (j)(1) of this Section;~~
- ~~3) That the applicant, if hired conditionally, may be terminated if the criminal records report indicates that the applicant has a record of conviction of any of the criminal offenses enumerated in subsections (a)(1) through (32) of this Section unless the applicant's identity is validated and it is determined that the applicant or employee does not have a disqualifying criminal history record based on a fingerprint based records check pursuant to subsection (h) of this Section or the employee receives a waiver pursuant to subsection (j)(1) of this Section;~~
- ~~4) That the applicant or employee cannot work in a direct care position while a waiver request is pending;~~
- ~~5) That the applicant, if not hired conditionally, shall not be hired if the criminal records report indicates that the applicant has a record of conviction of any of the criminal offenses enumerated in subsections (a)(1) through (32) of this Section unless the applicant's record is cleared based on a fingerprint based record check pursuant to subsection (h) of this Section or the employee receives a waiver pursuant to subsection (j)(1) of this Section;~~
- ~~6) That the employee may be terminated if the criminal records report~~

indicates that the employee has a record of conviction of any of the criminal offenses enumerated in subsections (a)(1) through (32) of this Section unless the record is cleared based on a fingerprint-based records check pursuant to subsection (h) of this Section or the employee receives a waiver pursuant to subsection (j)(1) of this Section.

g) **Conditional employment**

The agency may conditionally employ an applicant to provide direct care for up to three months pending the results of a UCIA criminal history record check. (Section 30(g) of the Health Care Worker Background Check Act [225 ILCS 46/30(g)])

h) **Request for fingerprint-based UCIA criminal records check**

An applicant, employee, or nurse aide whose UCIA criminal history record check indicates a conviction for committing or attempting to commit one or more of the offenses enumerated in subsections (a)(1) through (32) of this Section may request that the agency commence a fingerprint-based UCIA criminal records check by submitting information in a form and manner prescribed by the Department of State Police (see 20 Ill. Adm. Code 1265) within 30 days after receipt of the criminal records report to validate identity and clear one's record. (Section 35 of the Health Care Worker Background Check Act [225 ILCS 46/35])

bi) **Health Care Worker Registry request** ~~Eligibility~~ for waiver

1) *An applicant, employee, or nurse aide may request a waiver of the prohibition against employment. (Section 40 of the Health Care Worker Background Check Act [225 ILCS 46].)*

2) *The Department may grant a waiver based on any mitigating circumstances, which may include but not be limited to:*

A) *The applicant's, employee's or nurse aide's age at the time that the crime was committed;*

B) *The circumstances surrounding the crime;*

C) *The length of time since the conviction;*

D) *The applicant or employee's criminal history since the conviction;*

E) *The applicant or employee's work history;*

- F) ~~The applicant or employee's current employment references;~~
- G) ~~The applicant or employee's character references;~~
- H) ~~Nurse Aide Registry records; and~~
- I) ~~Other evidence demonstrating the ability of the applicant or employee to perform the employment responsibilities competently and evidence that the applicant or employee does not pose a threat to the health or safety of residents, recipients or clients. (Section 40(b) of the Health Care Worker Background Check Act [225 ILCS 46/40(b)])~~

j) Application for waiver

- 1) ~~If the applicant, employee or nurse aide wishes to request a waiver, the request shall be submitted within 5 calendar days after receipt of the criminal records report. A complete waiver request shall include the following:~~
 - A) ~~A statement specifying any mitigating circumstances (see subsection (i)(2) of this Section) the person believes are relevant to the employment in question; and~~
 - B) ~~Either:~~
 - i) ~~Information necessary for the Department to obtain a fingerprint based UCIA criminal records check, including a suitable set of fingerprints, in a form and manner prescribed by the Department of State Police (see 20 Ill. Adm. Code 1265), the fee for such a check (which shall not exceed the actual cost of the check) and the findings of the required non fingerprint based UCIA criminal records check conducted by the Department of State Police; or~~
 - ii) ~~The report of the results of the fingerprint based UCIA criminal records check done pursuant to subsection (h) of this Section.~~
- 2) CILA agency ~~Agency~~ employees may assist the applicant, employee, or nurse aide in completing the application.
- 3) The outcome of the waiver request shall be determined by the Illinois

Department of Public Health pursuant to Section 40 of the Health Care Worker Background Check Act and 77 Ill. Adm. Code 955. ~~The waiver request shall be submitted to:~~

~~Accreditation, Licensure and Certification
Department of Human Services
405 Stratton Building
Springfield IL 62765~~

k) ~~Waiver decision~~

- ~~1) The waiver request shall be reviewed by a panel of Department staff. The Department shall return a decision to the applicant, employee, or nurse aide and the provider within 30 calendar days after receipt of the completed waiver request including receipt of a report from the State Police based on the fingerprint-based record check.~~
- ~~2) The agency is not obligated to hire or offer permanent employment to an applicant or to retain an employee who is granted a waiver. (Section 40(f) of the Health Care Worker Background Check Act [225 ILCS 46/40(f)])~~
- ~~3) The Department shall be immune from liability for any waivers granted. (Section 40(e) of the Health Care Worker Background Check Act [225 ILCS 46/40(e)])~~

l) ~~Appeal of the decision~~

- ~~1) The applicant, employee, or nurse aide may request further review of his or her request for a waiver within 30 calendar days after the receipt of the Department's denial of the waiver.~~
- ~~2) The applicant, employee, or nurse aide may submit additional documentation of the mitigating circumstances.~~
- ~~3) The appeal shall be submitted to:~~

~~Director
Division of Disability and Behavioral Health Services
Department of Human Services
100 South Grand Avenue East~~

~~Springfield IL 62762~~

- 4) ~~The Director shall act on the appeal within 30 calendar days after receipt of the appeal and shall issue a final decision granting or denying the waiver request.~~
- m) ~~This Section shall not apply to:~~
- 1) ~~An individual who is licensed by the Department of Professional Regulation or the Department of Public Health under another law; or~~
 - 2) ~~An individual employed or retained by the agency as defined by Section 15 of the Health Care Worker Background Check Act [225 ILCS 46/15] for whom a criminal background check is required by another law of this State. (Section 20 of the Health Care Worker Background Check Act [225 ILCS 46/20]);~~
- n) ~~The agency shall send a copy of the results of the UCIA criminal history record check to the State Nurse Aide Registry for an individual employed as a nurse aide within 10 working days after receipt of the results. (Section 30(b) of the Health Care Worker Background Check Act [225 ILCS 46/30(b)])~~
- o) ~~The agency shall retain on file for a period of five years records of criminal records requests for all employees. The files shall be subject to inspection by the OALC. The agency shall retain the results of the UCIA criminal history records check and waiver, if appropriate, for the duration of the individual's employment. A fine of \$500 may be imposed for failure to maintain these records. (Section 50 of the Health Care Worker Background Check Act [225 ILCS 46/50])~~
- c) DCFS State Central Register/Child Abuse and Neglect Tracking System (CANTS)
- 1) The Community-Integrated Living Arrangements Licensure and Certification Act directs that the Department of Human Services establish a waiver process from the prohibition of employment or termination of employment for any applicant or employee listed on the DCFS' State Central Register seeking to be hired or maintain his or her employment with a community developmental services agency [210 ILCS 135/13].
 - 2) The CILA agency must comply with 59 Ill. Adm. Code 115.320(b)(3)(B).
 - 3) Application for waiver

- A) Waiver requests with all required and any supplemental materials should be submitted via email at DHS.CANTSDDWaiver@illinois.gov to the Department's Division of Developmental Disabilities (DDD). Waiver requests and supporting materials should be submitted via email; however, requests may be faxed to (217) 782-9444, or mailed to Division of Developmental Disabilities, Bureau of Quality Management, 600 East Ash, Building 400, Mail Stop 2 North, Springfield, IL 62703. Faxed and mailed waiver requests must be clearly marked as "DCFS CANTS Waiver Request." Waiver requests submitted by telephone will not be considered.
- B) The CILA provider or the individual listed on the DCFS' State Central Register (or their authorized representative) may submit waiver requests to DDD.
- C) If a CILA provider submits a waiver request for more than one employee or prospective employee at the same time, each request must be a separate submission.
- D) Upon receipt, DDD will review submitted materials and advise the waiver applicant, authorized representative or CILA provider, in writing, if any additional information is required.
- E) DDD will provide a response in writing to each waiver request within 30 calendar days after receipt and review of all applicable materials and responses from waiver applicant and/or CILA provider. DDD's review will include, but is not limited to, DCFS' investigative reports and DHS Office of the Inspector General's intake and investigative reports.
- F) Delays in receiving requested materials from the waiver applicant or CILA provider that exceed 30 calendar days and are without good cause will result in DDD issuing a denial of the waiver request. Waiver requests denied for waiver applicant or CILA provider delays may be resubmitted for consideration.
- G) If a waiver request is approved, it will be specific to a position and CILA provider.

- 4159 H) If a waiver request is approved, it will be automatically revoked
4160 upon notice to CILA provider of another listing of the waived
4161 individual on the DCFS' State Central Register.
4162
4163 D) All decisions by DDD regarding waiver requests will be final.
4164
4165 4) A waiver request must include the following information concerning the
4166 waiver applicant:
4167
4168 A) First, full middle, and last names;
4169
4170 B) Address (street and mailing, if different);
4171
4172 C) City, state, and zip code;
4173
4174 D) Maiden name, if applicable, and other names used;
4175
4176 E) Telephone number;
4177
4178 F) Date of birth;
4179
4180 G) Social Security Number;
4181
4182 H) CANTS finding from the DCFS' CANTS Background Check
4183 Information Form;
4184
4185 I) Name, address, phone, email and contact for CILA provider where
4186 position is sought or sought to be continued;
4187
4188 J) Position held or sought;
4189
4190 K) Work history, including current position;
4191
4192 L) Correspondence from CILA provider where position is sought or
4193 sought to be continued on CILA provider's letterhead which
4194 includes:
4195
4196 i) A signed statement of support for the waiver request from
4197 the CILA provider's chief executive officer;
4198
4199 ii) The length of time the individual has been employed by the
4200 CILA provider;
4201

iii) Information regarding previous employment by the provider in residential and day programs for people with intellectual/developmental disabilities;

iv) Applicable information regarding the individual's work history with the CILA provider organization, e.g., evaluations, any past disciplinary action (or lack thereof), positive recognition for work well done, etc.; and

M) Any additional information the individual would like to provide regarding the waiver request.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.325 Monitoring and ~~Evaluation~~evaluation

The CILA agency shall agree to participate in a monitoring and evaluation system as described in the contractual agreement between the Department and the CILA agency. Information regarding CILA provider compliance scores from licensure and certification surveys and quality assurance reviews, status of administration actions with CILA providers, as well as substantiated DHS OIG findings of abuse, egregious neglect and exploitation is available on the Department's website at <http://www.dhs.state.il.us/page.aspx?item=65616>.

a) Evaluation methodologies
CILA agencies~~Agencies~~ shall develop evaluation methodologies that address the issues of the effective and efficient use of program resources; for example, quality assurance, utilization review, and professional services review organization. The CILA agency shall also provide documentation of the implementation of these evaluation methodologies and demonstrate how the information gained through evaluation efforts is used in the planning process. The Department shall review and provide consultation in this evaluation effort.

b) Monitoring
Monitoring is the review of the CILA agency's compliance with contractual obligations, applicable statutes and administrative rules ~~ensuring~~~~insuring~~ that Departmental funds are spent appropriately for services as specified in the contractual agreement. Monitoring may include desk review and site review of CILA agency performance.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.326 Monitors and Receiverships

- a) The Department shall engage the provider and initiate a review of a CILA agency's service agreement for funding if it determines that issues including, but not limited to, substantiated cases of abuse and neglect and quality review status warrant such action. The review will be initiated by the Director of DDD, or their designee, and will commence on a date as determined by the Director or designee, but no later than 30 days after the decision has been made to initiate a review. A review shall be based on, but not limited to, any of the following:
- 1) a disproportionate number or percentage of complaints regarding licensure issues;
 - 2) a disproportionate number or percentage of substantiated cases of abuse, neglect or exploitation involving a CILA agency;
 - 3) an apparent unnatural death of an individual served by a CILA agency;
 - 4) any egregious or life-threatening abuse or neglect within a CILA agency;
or
 - 5) any other significant event as determined by the Department.
- b) Section 115.326(a) does not limit the Department's authority to take necessary action through its own or other State staff.
- c) When determined necessary by the Department, the Department shall inform the CILA agency that an independent monitor, who may be an individual or an employee or contractor with a business entity but shall not be staff of the Department or any other State agency, has been assigned to the CILA agency. Instead of, or in addition to, requesting an independent monitor, the Department may petition the circuit court for appointment of an independent receiver, who shall not be staff of the Department or any other State agency.
- 1) Assigned Independent Monitor
 - A) If other action, such as re-locating individuals to another CILA agency, is not indicated, the Department may assign an independent monitor to the CILA agency when any of the following conditions exist:
 - i) The CILA agency is operating without a license. The Department shall establish a schedule for closing the CILA agency and the monitor shall work with the CILA provider to transition the individuals.

- ii) The Department has suspended, revoked, or refused to renew the existing license of the CILA agency. The Department shall establish a schedule for closing the CILA agency and the monitor shall work with the provider to transition the individuals.
 - iii) The Department has issued a notice to terminate or not renew its provider agreement with the CILA agency.
 - iv) The CILA agency is closing or has informed the Department that it intends to close and adequate arrangements for transition of individuals have not been made at least 30 days prior to closure.
 - v) The Department determines that an emergency exists and the CILA agency is unwilling or unable to remedy the emergency. As used in this subsection, "emergency" means a threat to the health, safety, or welfare of individuals.
 - vi) The Department, with the concurrence of HFS, terminates the CILA provider's participation in the federal reimbursement program under Title XIX (Medicaid) of the Social Security Act (42 U.S.C. 7).
- B) The Department shall ensure that the assigned monitor meets the following minimum requirements:
- i) Is able to travel to various locations throughout Illinois in order to conduct on-site visits (see Section 115.326(c)(1)(C)(i));
 - ii) Has an understanding of the needs of individuals with developmental disabilities, as evidenced by no less than two years of full-time cumulative experience in working with individuals with developmental disabilities in programs such as developmental training, residential services, or advocacy;
 - iii) Has a clear and thorough understanding of the applicable licensure or certification standards which are the subject of

- 4330 the monitor's duties, as evidenced in a personal interview of
 4331 the candidate;
- 4332
- 4333 iv) Is not related to the owners/operators of the involved CILA
 4334 agency either through blood, marriage, or common
 4335 ownership of real or personal property, except ownership of
 4336 stock that is traded on a stock exchange;
- 4337
- 4338 v) Is certified as a QIDP or provides evidence of education
 4339 and experience equivalent to or greater than that of a QIDP;
 4340 and
- 4341
- 4342 vi) Does not have any other conflicting professional
 4343 relationship with the CILA agency or an ISC agency and is
 4344 not employed by or contracted with any other entity
 4345 currently providing direct services to individuals with
 4346 developmental disabilities.
- 4347
- 4348 C) The assigned monitor shall be under the supervision of the
 4349 Department and shall accomplish the following actions:
- 4350
- 4351 i) Conduct on-site visits to the agency as directed by the
 4352 Department;
- 4353
- 4354 ii) Review all records pertinent to the condition for the
 4355 monitor's placement under subsection (c)(1);
- 4356
- 4357 iii) Interview individuals, their guardians, and with the consent
 4358 of the individual and/or guardian, family members
 4359 regarding the services received and the needs of the
 4360 individuals;
- 4361
- 4362 iv) Provide to the Department oral and written reports detailing
 4363 the observed conditions of the agency and its operations;
 4364 and
- 4365
- 4366 v) Be available as a witness for hearings involving the
 4367 condition for placement as monitor as directed by the
 4368 Department.
- 4369
- 4370 D) All communications, including but not limited to, data,
 4371 memoranda, correspondence, records, and reports, shall be
 4372 transmitted to and become the property of the Department. In

addition, findings and results of the monitor's work performed under this Section shall be strictly confidential and shall not be released without written authorization from the Department, unless required by law or a court order.

E) The assignment as monitor may be terminated at any time by the Department with or without notice.

2) Section 115.326(c)(1) does not limit the Department's authority to take necessary action through its own or other State staff.

3) Assigned Independent Receiver

A) In the event the Department determines an emergency situation exists that threatens the health, safety, or welfare of individuals and the CILA agency is unwilling or unable to remedy the situation, the Department may petition the circuit court for appointment of an independent receiver. Through consultation with developmental disability professional organizations and advocacy groups, the Department shall maintain a list of independent receivers. Preference on the list shall be given to CILA agencies possessing extensive experience with individuals with developmental disabilities, and in financial and operations management of residential settings. To be placed on the list, the Department shall ensure the potential receiver meets the following minimum requirements:

i) Is able to travel to various locations throughout Illinois in order to conduct on-site visits;

ii) Has an understanding of the needs of individuals with developmental disabilities and the delivery of the highest possible quality of services, as evidenced by no less than two years of full-time cumulative experience in working with individuals with developmental disabilities in programs such as developmental training, residential services, or advocacy;

iii) Has a clear and thorough understanding and working knowledge of the applicable licensure or certification, as evidenced in a personal interview of the candidate;

- iv) Is not related to the owners/operators of the involved agency either through blood, marriage, or common ownership of real or personal property, except ownership of stock that is traded on a stock exchange;
 - v) Is certified as a QIDP, or provides evidence of education and experience equivalent to or greater than that of a QIDP; and
 - vi) Does not have any other conflicting professional relationship with the CILA agency or an ISC agency and is not employed by or contracted with any other entity currently providing direct services to individuals with developmental disabilities.
- B) Upon appointment of a receiver, the Department shall inform the individuals of all legal proceedings to date which concern the agency.
- C) In the case of Department-ordered transition of individuals to alternative services and supports, the Department shall establish a schedule for closing the agency and the receiver shall work with the CILA provider to transition the individuals. The receiver may also:
- i) Assist in providing for the orderly transition of any or all individuals served by the agency to other qualified agencies and/or make other provisions for their continued health and well-being;
 - ii) Assist in providing for transportation of individuals, records, and belongings if individuals are transitioned or discharged;
 - iii) Assist in locating alternative services and supports;
 - iv) Assist in preparing individuals for transition; and
 - v) Facilitate the participation of individuals and individuals' guardians/families in the selection of alternative services and supports.

- 4) Section 115.326(c)(3) does not limit the Department's authority to take necessary action through its own or other State staff.

(Source: Added at 47 Ill. Reg. _____, effective _____)

Section 115.330 Accreditation (Repealed)

- a) ~~Agencies demonstrating accreditation status under any of the standards of the accrediting organizations identified in the definition of "accreditation" in Section 115.120 of this Part shall be granted deemed status for the following Sections of this Part:~~
- 1) ~~Section 115.220(b) through (f);~~
 - 2) ~~Section 115.230(a) through (d), (e)(1) through (e)(3), (e)(4)(A) through (e)(4)(C), (e)(4)(E) and (F), (g) through (I);~~
 - 3) ~~Section 115.240(a) through (d) and (h) through (j);~~
 - 4) ~~Section 115.320(a) through (b)(2), (c), (f) and (h); and~~
 - 5) ~~Section 115.325(a).~~
- b) ~~Demonstration of current accreditation status shall be achieved by submission of a certificate of accreditation and the most recent accreditation report by the agency to the Department.~~
- c) ~~If the agency's accreditation status changes for any reason, the agency shall notify the Department of that change within 30 days after the effective date of the change.~~

(Source: Repealed at 47 Ill. Reg. _____, effective _____)

SUBPART D: LICENSURE REQUIREMENTS

Section 115.400 Applicability

This Part shall apply to all public or private CILA agencies, associations, sole proprietorships, partnerships, corporations, or organizations which certify CILAs and provide CILA services and are, therefore, subject to Department licensure.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.410 License Application~~application~~

a) Forms

- 1) Agencies must fulfill new provider requirements for prospective CILA providers within one of year of requesting a licensure application. Upon verification of eligibility, agencies can obtain an application~~shall apply~~ by contacting~~completing application forms available from~~:

The Bureau of Accreditation, Licensure and Certification
Department of Human Services
DHS.BALC@illinois.gov~~303 East Monroe, 2nd Floor~~
~~Springfield IL 62762~~

- 2) The application shall require prospective CILA agencies to certify that individuals being served and the programs and services to be provided in CILAs comply with Section 4 of the Community-Integrated Living Arrangements Licensure and Certification Act, ~~Chapter 2 of the Code~~, the Confidentiality Act, and this Part. Agencies that will be providing CILA services for individuals in the DDD Medicaid HCBS Waiver ~~The application~~ shall ensure~~request information including, but not limited to~~:

A) Services to be provided comply with 59 Ill. Adm. Code 120 and 42 CFR 441.301(c)(1) through (c)(4), which specifies Person-Centered Planning and Settings requirements for individuals receiving Medicaid HCBS Waiver Services;

B) Settings are not the type of settings described in 42 CFR 441.301(c)(5)(v); and

C) CILAs that will be provider-owned or controlled also meet the additional conditions set forth in 42 CFR 441.301(c)(4)(vi)(A) through (E).

- 3) The application shall request information including, but not limited to:

A) The CILA agency, ~~including~~ the type of business organization (per 805 ILCS 5 through 415)~~ownership~~, the names of all owners, partners, and stockholders;

B) The individuals being served or to be served in the CILAs supervised by the agency, including their disabilities and diagnoses~~diagnosis~~, any special needs such as visual or hearing

impairments or mobility issues, the kind of supervision received, and whether individuals are in living arrangements owned or leased by the agency;

C) The living arrangements used as CILA sites, including site addresses and telephone numbers;

~~D) A budget of the agency's estimated first year expenses and revenues;~~

~~D~~E) Policies and procedures of the agency; and

~~E~~F) Organizational chart, staffing patterns, and staff qualifications for the agency.

43) The authorized agency representative shall sign and date the application forms.

b) Fees

The Department shall charge a non-refundable licensure and renewal fee ~~up to \$200~~ as provided by Section 4(d) of the Community-Integrated Living Arrangements Licensure and Certification Act.

c) Renewal

On Department notification, each licensed agency shall submit a signed and dated renewal application at least 120 days prior to expiration of the license.

d) Change in Ownership

The agency will notify BALC and DDD within 60 business days of any change of ownership including the type of business organization (see 805 ILCS 5 through 415), the names of all owners, partners, and/or stockholders.

e) CILA agencies must be operational within 18 months or the Department will consider the licensure process abandoned. Any future licensure application by the provider will be considered a new application.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.420 Application Acceptance~~acceptance~~ and Verification~~verification~~

a) Applications for licensure or licensure renewal shall be acknowledged as~~deemed~~ received by the Department on the postmarked and/or electronic submission date.

- b) An agency shall have 60 days after the Department has responded to its application request to complete an application.
- c) The application shall include signature and date.
- d) The Department shall notify an agency of any error or omission made in the submission of an application for licensure within 30 days. Failure of the Department to respond shall not constitute a waiver of the requirements. If the agency fails to respond to the letter of deficiency~~notice~~ within 30 days of the electronic submission~~after the postmark~~ date, the Department shall terminate the application process and notify the agency within 30 days.
- e) The Department shall either approve or disapprove a completed application within 60 days after the Department has completed the application process~~its receipt~~. If an application is incomplete, the Department shall notify the applicant of the status.
- f) The Department may verify information supplied in licensure applications.
- g) The Department will not accept an application for a period of two years from an agency, or the principals of an agency now doing business under another name, when the original agency license was revoked or services were terminated while the agency was not in good standing.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.430 Issuing a License~~license~~ and Period~~period~~ of Licensure~~licensure~~

- a) On receipt of a completed application and verification of the agency's compliance with this Part, the Department shall issue a license which will authorize agencies to certify that programs provided in CILAs comply with ~~the Code~~, the Confidentiality Act and this Part.
- b) The Department shall conduct surveys of licensed agencies and their certified programs and services. The Department shall review the records or premises, or both, as it deems appropriate for the purpose of determining compliance with the Community-Integrated Living Arrangements Licensure and Certification Act, ~~the Code~~, the Confidentiality Act, and this Part. For agencies that will be providing CILA services for individuals in the DDD Medicaid HCBS Waiver, the Department shall also determine compliance with 59 Ill. Adm. Code 120 and 42 CFR 441.301(c)(1) through (c)(4), as well as confirm they do not have the characteristics described in 42 CFR 441.301(c)(5)(v). For CILAs that will be provider-owned or controlled, the Department shall review agency policies to

confirm compliance with additional conditions set forth in 42 CFR 441.301(c)(4)(vi)(A) through (E).

- 1) The Department shall conduct ~~unannounced~~~~scheduled~~ surveys to determine compliance at the time of license renewal ~~as well as~~~~and may conduct unscheduled surveys~~ to investigate complaints, health and safety inspections, and other concerns as deemed warranted by the Department.
 - 2) Determination of compliance with the service requirements contained in Subpart B of this Part shall be based on a survey centered on the individual which samples services being provided.
 - 3) Determination of compliance with the general agency requirements contained in Subpart C of this Part shall be based on a review of agency records and observation of individuals and staff.
- c) Upon completion of the application process the Department may issue a provisional license to an applicant for up to one year and allow the holder of this license to operate one CILA site, serving up to eight individuals~~On initial application to the Department, the Department may issue a provisional license to an applicant for a one year period to allow the holder of such license reasonable time to become eligible for a full license. (Section 4(f) of the Community-Integrated Living Arrangements Licensure and Certification Act) During the provisional license period, the agency may be limited in the number of individuals it may serve and the number of sites it may supervise pending a determination of eligibility for full licensure.~~
- d) A license, other than the ~~one year~~ provisional license, shall be valid for ~~two~~three years unless revoked in accordance with Section 4(e) of the Community-Integrated Living Arrangements Licensure and Certification Act.
- e) CILA agencies~~Agencies~~ found during a survey to be in substantial compliance with this Part shall be relicensed for an additional ~~two~~three-year period.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.440 License Sanctions~~sanctions~~ and Revocation~~revocation~~

- a) The Department may revoke a license at any time if the agency:
 - 1) Fails to comply with the service requirements identified in Subpart B of this Part;

- 2) Fails to comply with the general agency requirements identified in Subpart C of this Part;
 - 3) Fails to correct deficiencies identified as a result of an on-site survey by the Department, or fails to submit a plan of correction within 30 days after receipt of the notice of deficiency~~violation~~;
 - 4) Submits false information either on Department forms, required certifications, plans of correction or during an on-site inspection;
 - 5) Refuses to permit or participate in a scheduled or unscheduled survey; or
 - 6) Willfully violates any rights of individuals being served as identified in Chapter II of the Code or Section 115.250.
- b) The Department shall refuse to license or relicense an agency or shall deny or revoke a license if the owner and/or authorized agency representative or licensee has been convicted of a felony, or a misdemeanor involving moral turpitude, as shown by a certified copy of the court of conviction.
- c) CILA provider agencies, as a result of an on-site survey, shall be recognized according to levels of compliance with standards as set forth in this Part, as specifically defined in interpretive guidelines made available to CILA agencies. CILA agencies~~Agencies~~ with findings from Level 1 to Level 3 will be considered to be in good standing with the Department. Findings from Level 3 to Level 5 will result in a notice of deficiency~~violations~~, a plan of correction and defined sanctions. Findings resulting in Level 6 will result in a notice of violations and license revocation based on what's laid out, below~~defined sanction~~. The levels of compliance are:
- 1) Level 1 - Full compliance with CILA standards.
 - 2) Level 2 - Acceptable compliance with CILA standards. No written plan of correction will be required from the agency.
 - 3) Level 3 - Partial compliance with CILA standards. An administrative warning is issued. The agency shall submit a written plan of correction.
 - 4) Level 4 - Minimal compliance with CILA standards. The agency shall submit a written plan of correction, and the Department will issue a probationary license. A re-survey shall occur within 90 days.
 - 5) Level 5 - Unsatisfactory compliance with CILA standards. The agency

shall submit a written plan of correction, and the Department will issue a restricted license. A re-survey shall occur within 60 days.

- 6) Level 6 - Revocation of the agency's license to provide CILA services. Revocation shall occur as a result of an agency's consistent and repeated failure to take necessary corrective actions to rectify documented ~~deficiencies~~violations, and/or the agency's failure to protect ~~individuals~~clients from situations that produce an imminent risk.
- d) Prior to initiating formal action to sanction a CILA license, ~~the Department~~OALC will allow an organization an opportunity to take corrective action to eliminate or ameliorate a ~~deficiency~~violation of this Part except in cases in which ~~the Department~~OALC determines that emergency action is necessary to protect the public or individual interest, safety, or welfare.
- e) Subsequent to an on-site survey, ~~the Department~~OALC shall issue a written notice to an agency/organization. ~~The Department~~OALC shall specify the particular Sections of this Part, if any, with which the agency is not compliant. ~~The Department's~~OALC's notice shall require any corrective actions be taken within a specified time period as required by this Part.
- f) If the Department does not approve an agency for license renewal or revokes a license, it shall notify the agency in writing of the opportunity for a hearing per Section 115.470.
- g) Sanctions will be imposed according to the following definitions:
 - 1) Administrative notice - A written notice issued by ~~the Department~~OALC that specifies rule ~~deficiencies~~violations requiring a written plan of correction with time frames for corrections to be made and a notice that any additional violation of this Part may result in a higher level sanction. (Level 3)
 - 2) Probation - Compliance with standards is minimally acceptable and necessitates immediate corrective action. Individuals' life safety or quality of care are not in jeopardy. The probationary period is time limited to 90 days. During the probationary period, the agency must make corrective changes sufficient to bring the agency back into good standing with the Department. Failure to make corrective changes within that given time frame may result in a determination to initiate a higher level sanction. The admission of new individuals shall be prohibited during the probationary period. (Level 4)

- 3) Restricted license - An agency is sanctioned for unsatisfactory compliance. The admission of new individuals shall be prohibited during the restricted licensure period. Corrective action sufficient to bring the agency back into good standing with the Department must be taken within 60 days. During the restricted licensure period a Division monitor will be assigned to oversee the progress of the agency in taking corrective action. Depending on the severity of the ~~deficiencies~~violations, individuals may be moved to another CILA site supervised by the same agency or a site supervised by another agency. If individuals are moved to a site supervised by another agency, funding for the services will also be moved. If corrective actions are not taken, the agency will be subject to a higher level sanction. (Level 5)
- 4) Revocation - Revocation of the CILA license is withdrawal by formal actions of the CILA license. The revocation shall be in effect until such time that the CILA provider submits a re-application and the agency can demonstrate its ability to operate in good standing with the Department. The Department has the right not to reinstate a license. If revocation occurs as a result of imminent risk, all individuals will be immediately relocated to another agency and all CILA funding will be transferred. (Level 6)
- 5) Financial penalty - A financial penalty may be imposed upon finding of ~~deficiency~~violation in any one or combination of the provisions of this Part. In determining an appropriate financial penalty, the Department may consider the deterrent effect of the penalty on the organization and on other providers, the nature of the ~~deficiency~~violation, the degree to which the ~~deficiency~~violation resulted in a benefit to the organization and/or harm to the public and any other relevant factor to be examined in mitigation or aggravation of the organization's conduct. The financial penalty may be imposed in conjunction with other sanctions or separately.
- 6) Targeted license - An agency with multiple CILA sites may be sanctioned for non-compliance according to the performance of the respective sites. Failure of one site to comply may result in a sanction-level determination for the individual site and may not impact on the license of the parent agency. One exception to the foregoing shall be an agency's continuous administrative failure to implement corrective changes for a site in accordance with a finding of ~~deficiencies~~violations and stipulated time frames to come into compliance. The CILA license of the agency may be subject to sanctions in those cases.
- 7) Higher level sanctions may be imposed in situations where there are repeat

deficiencies~~violations~~.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.460 Cessation of Operations~~operations~~

- a) If, at any time, an agency determines that it will terminate operation as a licensed CILA agency, it shall notify the Department of its decision at least 60 days prior to the date of termination. Agencies can only cease operations in less than 60 days with written approval from the Department.
- b) Said notice shall be given to the Department, to service providers working with all affected individuals, to any individual who must be transferred or discharged, to the individual's guardian, and to a member of the individual's family, when applicable.
- c) The notice shall state the proposed date for cessation and the reason.
- d) The agency shall assist individuals in securing alternative services and shall advise individuals on available alternatives.
- e) The agency shall be responsible for services to individuals until cessation of operation as a licensed CILA agency occurs and shall work cooperatively with the Department and ISC agency in efforts to secure and transition individuals to alternative services. This includes, but is not limited to, supplying records and other documents, supplying the individual's personal items, and conferencing with prospective agencies regarding individual's care~~in securing alternative services.~~

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.470 Hearings

- a) If an agency contests the Department's decision regarding licensure pursuant to subsection (a), (b), or (c) ~~of this Section~~, it can request a hearing ~~pursuant to this Section~~ by submitting a written request within 20 working days to the Department's Bureau of ~~Administrative~~ Hearings at the address stated in the notice~~100 South Grand Avenue East, 3rd Floor, Springfield, Illinois 62762~~. The Department shall notify the agency of the time and place of the hearing not less than 14 days prior to the hearing date.
- b) A license may not be denied or revoked unless the agency is given written notice of the grounds for the Department's action. Except when revocation of a license is based on imminent risk, the agency ~~program~~ whose license has been revoked may

operate and receive reimbursement for services during the period preceding the hearing, until ~~such time as~~ a final decision is made.

- c) Hearings shall be conducted in accordance with the Department's Administrative Hearings rules ~~rule~~ at 89 Ill. Adm. Code 508, ~~Administrative Hearings~~.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

SUBPART E: HOST FAMILY LIVING ARRANGEMENTS

Section 115.500 Program Description

- a) This Subpart details those requirements specific to the Host Family Living Arrangements Program (traditional care model and shared living model) beyond the basic CILA requirements.

- b) The Host Family Living Arrangement Program consists of two major program components, the Traditional Care Model and the Shared Living Model.

1) Traditional Care Model

Host family living arrangements, traditional care models are 24-hour residential alternatives to typical shift staff arrangements. The setting is the residence for the person with a developmental disability and the full-time residence for the paid caregivers. It is owned, leased, or rented by the paid caregivers. In traditional care settings, host families consist of one or more persons who are unrelated to the individual with a developmental disability and who are under contract with the CILA ~~provider~~ agency to provide host family services.

2) Shared Living Model

Host family living arrangements, shared living models are also 24-hour residential alternatives to typical shift staff arrangements. The setting is the residence for the person with a developmental disability and may house either full or part-time caregivers in which more than 50 percent of the residential coverage is provided by individuals other than shift employees. It is owned, leased, or otherwise controlled ~~rented~~ by either the individual, the caregivers, or the agency. In shared living models, host families consist of one or more persons who are unrelated to the individual with a developmental disability and who are under contract, or employed by the CILA ~~provider~~ agency, to provide host family services.

The difference between traditional care and shared living models is that, in the shared living model, shift employees of the CILA ~~provider~~ agency

routinely share supervision, care and training responsibilities with the host family caregivers who are providing services under contract.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.510 Compliance with this Part

For purposes of clarification, host family arrangements, whether traditional care or shared living models, are subject to all provisions of this Part, including Subparts [A through D](#)~~B and C~~. The [CILA provider](#) agency shall ensure that host families are aware of and comply with all requirements of this Part.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.520 Program Requirements

Maximum emphasis is to be placed on the needs and requests of the individual with developmental disabilities who is under consideration to receive host family services.

- a) The [CILA provider](#) agency is responsible for assessing potential host family caregivers' capabilities to provide appropriate services to individuals with developmental disabilities.
- b) The [CILA provider](#) agency shall ensure that all host family caregivers are either employed by or have a signed contract with the licensed [CILA provider](#) agency.
- c) The [CILA provider](#) agency shall ensure that the primary caregiver is at least 21 years of age.
- d) The [CILA provider](#) agency shall conduct criminal background checks on all other persons living in the home of the host family who are age 16 or older.
- e) The [CILA provider](#) agency shall ensure that host family members are not relatives or guardians of the individuals with developmental disabilities for whom they provide services.
- f) The [CILA provider](#) agency shall ensure that host families do not also provide foster care services to children. Waivers may be requested for long-standing relationships as children age out of DCFS programs. The intent of such waivers is to provide uninterrupted services to successful, current family arrangements. Waiver requests will be reviewed through on-site observations and interviews to determine that both the site and the program meet requirements as specified in this Part and are in the best interest of the person with developmental disabilities.

The Department reserves the right to deny any such waiver requests.

- g) The CILAprovider agency shall ensure that at least one member of the host family has a current driver's license with a safe driving record; a vehicle to accommodate the needs of the person with developmental disabilities; and automobile insurance with at least minimum coverage as required by the State of Illinois. This requirement may be waived by the Department if the family has access to and uses public transportation and public transportation is appropriate for the individual.
- h) The CILAprovider agency shall ensure that persons under contract as host family members who engage in additional employment or contract work commit the resources necessary (including time and energy) to meet the requirements of this Part in providing services and supports for individuals. In doing so, the CILAprovider agency must ensure that:
 - 1) In situations where the host family encompasses only one responsible adult, that adult may not engage in additional employment or contract work without the knowledge of the CILAprovider agency.
 - 2) In situations where the host family encompasses more than one responsible adult, the primary caregiver may not engage in additional employment or contract work without the knowledge of the CILAprovider agency.
 - 3) The primary caregiver has demonstrated that he or she can be available in the event an individual unexpectedly requires support, e.g., becomes ill, etc.
- i) Licensed CILAprovider agencies must ensure that caregivers who provide a preponderance of care furnish services and supports that ensure the individual's general welfare.
- j) The CILA agency shall have a plan and arrangements for providing relief for employees and contractual workers who have responsibility more than eight consecutive hours or five consecutive days for individuals receiving CILA services and shall have evidence of implementation of the plan and arrangements. This plan shall comply with federal and State labor laws and shall provide recognition of the need for relief in host family model settings.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.530 CompatibilityPairing of Individualsindividuals and Host Familieshost

families

- a) The ~~provider agency shall ensure that at least the~~ following ~~areas are~~ factors must be considered when determining the compatibility ~~in the pairing~~ of individuals with developmental disabilities and host family members:

- 1a) Smoking~~smoking~~ habits;
- 2b) Waking~~waking~~ and bedtimes~~bed-times~~;
- 3e) Meal~~meal~~ preferences;
- 4d) Social~~social~~ interests;
- 5e) Cultural~~cultural~~ needs;
- 6f) Chores~~chores~~; and
- 7g) Other~~other~~ unique needs.

- b) Differences in preference and needs must be identified and must be avoided or addressed in Personal Plans~~individual service plans~~.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.540 Department Approval~~approval~~ of Host Family Services~~host family services~~

- a) Any CILA~~provider~~ agency desiring to provide host family services must meet the following requirements:
- 1) Demonstrate~~demonstrate~~ knowledge and experience in the provision of such services;
 - 2) Provide~~provided~~ shift-staff services under the CILA program for the past two consecutive years;
 - 3) Achieve~~achieved~~ a compliance level of 1 or 2 during the most recent CILA licensure survey process.
- b) An interview and record review process may also be used to determine the ability of the agency to provide host family services.

c) The CILA~~provider~~ agency shall seek and obtain prior Department approval for all host family arrangements before service implementation.

1) During this prior approval process, the CILA~~provider~~ agency shall submit materials and information regarding, but not limited to, the following ~~issues~~:

A) Number~~number~~ and characteristics of individuals living in and routinely visiting (as defined in Section 115.560(b) the residence~~setting~~;

B) Physical layout and other~~physical~~ characteristics of the residence and the surrounding neighborhood~~environment~~;

C) Legal address of the residence;

~~D~~C) Description of the needs of the individuals to be served;

~~E~~D) Personal Plans and Implementation Strategies~~proposed-service plans~~;

F) Information as listed in Section 115.590(a)(4) through (a)(9) and (a)(11); and

~~G~~E) Proposed arrangements for relief services~~;-and~~

~~F~~) ~~monitoring of the setting~~.

2) The CILA ~~agency~~~~provider~~ shall assist the Department as needed in conducting site visits of each proposed host family resident~~setting~~ during the prior approval process.

d) Parents, other relatives, and legal guardians may not provide host family services.

~~ed~~) The CILA~~provider~~ agency must report to DDD and BALC~~the Department~~ changes in the host family arrangements that impact the lives of the individuals with developmental disabilities. The CILA~~provider~~ agency shall seek and obtain the Department's~~Department~~ approval to continue services in the event of such changes in host family arrangements subsequent to service implementation. These changes may include, but are not limited to:

1) Movement~~movement~~ to a new residential location;

- 2) Changes~~changes~~ in the makeup of the household;
- 3) Changes~~changes~~ in the working arrangements of the host family; and
- 4) Significant~~significant~~ changes in the needs of the individuals with developmental disabilities.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.550 Number of Individuals Served~~individuals served~~ in Host Family Settings~~host family settings~~

- a) No more than two individuals with developmental disabilities may reside with any one host family.
- b) The CILA~~provider~~ agency is responsible for informing DDD and BALC~~the Department~~, the individual, and/or~~and his or her~~ guardian in advance of any changes, ~~prior to the changes occurring~~, involving individuals moving into or out of the home, as well as host family relocation to another residence.
- c) The CILA~~provider~~ agency may request waiver of subsection (a) to allow up to four persons with developmental disabilities to be served in the same residence~~setting~~. The process for submission and review of waiver requests is as follows:
 - 1) A request packet must be compiled by the licensed CILA~~provider~~ agency and submitted to the Department.
 - 2) The Department~~The Bureau of Accreditation, Licensure, and Certification, in cooperation with the Office of Developmental Disabilities~~, will make final decisions on waiver requests.
 - 3) The request packet must include a description of the waiver being requested; information substantiating the appropriateness of the waiver; and a proposed Implementation Strategy~~individual service plan signed by the complete interdisciplinary team~~ incorporating the waiver. If the waiver impacts more than one individual served, a Personal Plan and an Implementation Strategy~~individual service plan~~ must be included for each individual involved.
 - 4) The request packet must be approved and signed by the appropriate QIDP~~QMRP~~ and executive director or Chief Executive Officer~~, or by an authorized Department representative~~.

- 5) The CILA agency must complete and submit~~Department may develop~~ a standardized application form for waiver requests as well as include supporting documents. If an application is incomplete, the Department shall notify the applicant of the status.
 - 6) The Department will conduct a site visit or visits to review the home, meet the host family, and meet and observe the individuals served prior to the approval of any waiver of the requirements of subsection (a).
 - 7) The Department will consider whether the requested waiver provides for the individual's general well-being, safety, choices, and service needs in making a determination of whether to grant the requested waiver.
 - 8) The request packet must be approved by an authorized Department representative.~~Completed requests for waiver will be responded to within 30 calendar days after receipt by the Department. If a site visit is determined necessary prior to making a determination regarding the waiver request, the Department will respond within 60 calendar days after the receipt of the request.~~
- d) In the event of a denial of a waiver request involving settings in existence prior to 2001, individuals whose services are funded by the Department would be required to choose another residential setting if they wish funding to continue.
 - e) The Department reserves the right to deny any waiver requests.
 - f) Complete~~The Bureau of Accreditation, Licensure and Certification (BALC), in cooperation with the Office of Developmental Disabilities, will make the final decision on waiver~~ requests. Requests for waivers will be responded to within 30 calendar days after receipt by the Department. If an on-site visit is deemed necessary prior to making a determination regarding the waiver request, the Department will respond within 60 calendar days after receipt of the request.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.560 Number of Individuals Living~~individuals living~~ in Host Family~~Settings~~~~host family settings~~

- a) No more than six persons, including members of the host family and individuals with developmental disabilities, may reside in a single site.
- b) This number shall include extended family members who routinely and

continually visit the home for support. Examples may include preschool children such as grandchildren, nieces or nephews who stay during the working hours of their parents/guardians, sons or daughters who routinely return from college on weekends, and persons who move to the setting at a later date.

c) The CILA agency~~provider agency~~ may request a waiver of subsection (a) to allow up to eight persons to reside in a single site, inclusive of the number of individuals with developmental disabilities. The process for submission and review of waiver requests is as follows:

- 1) A request packet must be compiled by the licensed CILA~~provider~~ agency and submitted to the appropriate department representative~~Department~~.
- 2) The Department~~The Bureau of Accreditation, Licensure, and Certification, in cooperation with the Office of Developmental Disabilities,~~ will make final decisions on waiver requests.
- 3) The request packet must include a description of the waiver being requested; information substantiating the appropriateness of the waiver; and a proposed Implementation Strategy~~individual service plan signed by the complete interdisciplinary team~~ incorporating the waiver. If the waiver impacts more than one individual served, an Implementation Strategy~~individual service plan~~ must be included for each individual involved.
- 4) The request packet must be approved and signed by the appropriate QIDP~~QMRP~~ and executive director, or by an authorized Department representative.
- 5) The CILA provider must complete and submit~~Department may develop~~ a standardized application form for waiver requests as well as include supporting documents. If an application is incomplete, the Department shall notify the applicant of the status.
- 6) The Department will conduct a site visit or visits to review the home, meet the host family, and meet and observe the individuals served prior to the approval~~approved~~ of any waiver of the requirements of subsection (a).
- 7) The Department will consider whether the requested waiver provides for the individual's general well-being, safety, choices, and service needs in making a determination of whether to grant the requested waiver.
- 8) ~~Completed requests for waiver will be responded to within 30 calendar~~

days after receipt by the Department. If a site visit is determined necessary prior to making a determination regarding the waiver request, the Department will respond within 60 calendar days after the receipt of the request.

- d) ~~Completed~~The Bureau of Accreditation, Licensure and Certification (BALC), in cooperation with the Office of Developmental Disabilities, will make the final decision on these waiver requests. Requests for waivers will be responded to within 30 calendar days after receipt by the Department. If an on-site visit is deemed necessary prior to making a determination regarding the waiver request, the Department will respond within 60 calendar days after receipt of the requestdays.

- e) The Department reserves the right to deny any waiver requests.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.570 CILA Agency Requirements~~Provider requirements~~

- a) The CILA~~provider~~ agency is responsible for adhering to Department of Labor and Internal Revenue Service regulations. The agency is also responsible for assuring compliance with DHS Division~~Office~~ of Developmental Disabilities provider agreement~~contractual~~ requirements, rules and procedures, and quality assurance ~~and accreditation~~ requirements, as applicable.
- b) The CILA~~provider~~ agency is responsible for informing the Department, the individual and/or ~~his or her~~ guardian in advance of any changes in host family composition and of any changes in staffing, ~~prior to the changes occurring~~ if possible.
- c) The CILA~~provider~~ agency is responsible for the training of caregivers as described in Section 115.320(d).

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.580 24-Hour Service~~24-hour service~~

Individuals living in host family arrangements are considered in need of 24-hour service. For this reason, the CILA~~provider~~ agency shall:

- a) Ensure that, in accordance with Section 115.230(~~bq~~)(9) and (~~bf~~)(10), host families do not leave the individuals they serve alone or in the care of individuals providing natural supports, unless such action is specifically called for in an

individual's Personal Plan and Implementation Strategy~~service plan~~ to support training initiatives to increase independence, and then only for the duration specified in the Personal Plan and Implementation Strategy~~individual's ISP~~.

- b) Ensure that individuals shall not be left alone for the convenience of the host family or CILA~~provider~~ agency. For example, individuals shall not be left alone before or after day program hours while host family members travel to and from work or school.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.590 Minimum CILA Agency/Caregiver Contract Requirements~~agency/caregiver contract requirements~~

- a) All independent contractors or caregivers shall provide services in compliance with a contract or signed agreement made with the CILA~~provider~~ agency. The contract or signed agreement shall include, at a minimum, the following provisions:
 - 1) Names of the caregivers and all other individuals residing in the home.
 - 2) Names of the individuals served.
 - 3) Legal address and phone number of the residence.
 - 4) Signed assurance of compliance with all applicable federal and State rules and regulations.
 - 5) Description and documentation of training of the primary caregivers.
 - 6) Detailed description of how the home will be monitored by the CILA~~provider~~ agency and related entities, including assurance of the host family's compliance with investigations of the Department's Office of the Inspector General, Centers for Medicare & Medicaid Services~~federal CMMS~~, Department of Healthcare and Family Services~~DPA~~, DHS, and the CILA~~provider~~ agency.
 - 7) Description of how the transportation needs of the individual will be met.
 - 8) Description of the expected daily schedule of the individuals and caregivers.
 - 9) Indication of participation in the development and/or review of the

individual's Personal Plan and Implementation Strategy~~service plan~~ and how ongoing documentation of service delivery will occur.

10) Description of relief services, including number per month, arrangements for relief services, requests for additional relief services, and responsibility to take relief time.

11) How documentation of the individual's financial resources will occur.

12) If the primary caregiver is employed outside the home, information relative to the outside employment, including:

A) The CILA agency's~~the provider agency's~~ approval of outside employment for the caregiver;

B) Employer's~~employer's~~ name, address, and phone number;

C) Employer's~~employer's~~ type of business;

D) Hours~~hours~~ caregiver will be working in this employment;

E) Name~~name~~, address, and phone number of the authorized substitute caregiver who will provide care in the absence of the primary caregiver; and

F) Copy~~copy~~ of the documentation of training of the substitute caregiver.

13) Other information as determined by the individual receiving services and their~~his or her~~ family/guardian, the host family caregiver, the CILA~~provider~~ agency, and the Department.

b) Additional staff support

1) In exceptional circumstances, the Department may require CILA~~provider~~ agencies to utilize shift staff support in addition to the services provided by the host family. These exceptional circumstances may include, but are not limited to, the following:

A) Residences~~settings~~ serving more than two individuals, per approval of a waiver by the Department;

B) Transitional~~transitional~~ periods during initial service

implementation;

- C) Circumstances in which~~circumstances where~~ individuals are experiencing serious maladaptive behaviors;
- D) Circumstances in which~~circumstances where~~ individuals are experiencing serious medical issues;
- E) Situations in which~~situations where~~ host families are experiencing transitional or crisis periods; and
- ~~F) provider agencies with no experience in host family arrangements; and~~
- FG) CILA~~provider~~ agencies under sanction by the Department.

- 2) Other staff coverage may be determined by the agency, DHS, and the contractor (as applicable), as guided by the individual's needs, and following the agency's quality assurance plan for service delivery.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.600 Relief Services~~services~~

- a) Each host family shall develop and submit a plan for the provision of relief services to the CILA~~provider~~ agency for approval. The plan will be controlled by the host family in accordance with Department of Labor rules and regulations.
- b) The CILA agency shall have a plan and arrangements for providing relief for employees and contractual workers who have responsibility more than eight consecutive hours or five consecutive days for individuals receiving services and shall have evidence of implementation of the plan and arrangements. This plan shall comply with federal and State labor laws and shall provide recognition of the need for relief in host family model settings.
- c) For each traditional care setting, the CILA~~provider~~ agency shall develop, maintain, and implement a plan to provide relief services.
 - 1) The relief plan shall provide, at a minimum, an average of 20 hours of relief services monthly per individual served, and two weeks per year of vacation/personal time for each caregiver.
 - 2) Relief hours shall be documented by the CILA~~provider~~ agency.

- 3) The CILA~~provider~~ agency shall develop criteria and implement procedures for host families to request more than the required minimum average hours of relief based on an individual's needs. The CILA~~provider~~ agency must submit this criteria and procedures to the Department for prior review. The Department may require changes based upon its review.
- 4) The CILA~~provider~~ agency shall employ or contract with, train, and pay all persons providing relief services to the host family. These functions shall not be performed by the host family.
- 5) The CILA~~provider~~ agency shall not allow for relief services for a host family by a relative of the host family.
- 6) All relief workers must meet the same training requirements and background checks as~~of~~ the host family.
- 7) The CILA~~provider~~ agency shall ensure that host families do not leave individuals in the care of untrained and/or unauthorized persons.
- 8) Individuals shall not be moved from their residence for durations of overnight stays or longer for the sole purpose of providing relief to host families. Overnight or absence from the host family arrangement for the benefit of the individuals must be addressed in the Personal Plan and Implementation Strategy~~ISP~~.

(Source: Amended at 47 Ill. Reg. _____, effective _____)

Section 115.620 Quality Assurance Plan~~assurance-plan~~

In addition to general oversight requirements stated or implied in other Sections of this Part, the CILA~~provider~~ agencies' own quality assurance plans must ensure that additional monitoring occurs through visits by the following staff:

- a) A QIDP~~QMRP~~ employed by the CILA~~provider~~ agency will conduct a minimum of one 1-hour visit per month with each individual served in host family settings. These face-to-face visits shall occur at the individual's residence while the individual is present. Issues to monitor include, at a minimum:
 - 1) Health~~health~~ of the individual;
 - 2) Safety~~safety~~ of the individual;

- 3) ~~Provision~~provision of services as outlined in the individual's Implementation Strategy~~service plan~~;
 - 4) The individual's satisfaction with level of service received; and
 - 5) The individual's integration into the ~~recommended~~ living environment and community outlined in the individual's Personal Plan and Implementation Strategy~~service plan~~.
- b) Program management ~~or~~of professional services staff will visit each individual two times per month for a minimum of one hour each visit. The staff member shall be knowledgeable about the individual's Personal Plan and Implementation Strategy~~service plan~~ and the applicable rules and regulations covering the setting. These face-to-face visits shall occur at the individual's residence while the individual is present. The Department reserves the right to require additional visits if deemed necessary. At least one visit each month shall be unannounced. Issues to monitor include, at a minimum, those identified in subsection (a)(~~1~~).

(Source: Amended at 47 Ill. Reg. _____, effective _____)

SUBPART F: REIMBURSEMENT RATE COMPONENTS

Section 115.700 Purpose (Repealed)

~~The Department funds CILA services for persons with developmental disabilities and for persons with mental illness using two separate mechanisms due to the differences in the nature of the mental disability. CILA services for persons with mental illness are funded through grants under 59 Ill. Adm. Code 103 and 132. CILA services for persons with developmental disabilities are funded through the rate methodology described in this Subpart, as mandated by Section 9 of the Community Integrated Living Arrangements Licensure and Certification Act [210 ILCS 135/9]. Rates for all host family settings shall be determined by the Department through the CILA rate methodology. The Department may develop a version of the methodology specifically modified for host family settings.~~

(Source: Repealed at 47 Ill. Reg. _____, effective _____)

Section 115.710 Rate Components~~components~~ (Repealed)

~~The components of Department reimbursement for CILA services for persons with developmental disabilities may include, but shall not be limited to, the following, using costs as reported on the Interagency Statistical and Financial Report, or its successor, and other sources as deemed appropriate by the Department:~~

- a) ~~Base support costs including allowances for "room and board", "program", "transportation", and "administration". Base support costs are considered to be those that are incurred in the delivery of CILA supports to individuals with developmental disabilities for the purchase of services that are common to all CILA recipients with similar living arrangements and direct service staffing and transportation needs.~~
- 1) ~~Room and board cost centers~~
~~The "room and board" allowance includes costs incurred in keeping a home in normal operation. Cost centers under the room and board major allowance category may include:~~
- ~~A) Housing;~~
 - ~~B) Utilities;~~
 - ~~C) Telephone;~~
 - ~~D) Building and Property Insurance;~~
 - ~~E) Maintenance and Housekeeping;~~
 - ~~F) Food Supplies;~~
 - ~~G) Nonfood Supplies; and~~
 - ~~H) Other, not elsewhere classified.~~
- 2) ~~Program cost centers~~
~~The program allowance includes costs incurred in providing habilitation services and supports to the extent allowed by the CILA rate model. Cost centers under the program major category may include:~~
- ~~A) Direct care staff and supervision;~~
 - ~~B) Fringe benefits;~~
 - ~~C) Other supplies;~~
 - ~~D) Miscellaneous consultant services; and~~
 - ~~E) Other, not elsewhere classified.~~

3) ~~Transportation~~

~~Transportation cost may be incurred while providers assist and/or train the persons living in the CILA home in the activities of daily living.~~

4) ~~Administration~~

~~All administrative costs associated with community agency overhead expenses as they relate to the delivery of CILA supports are included within the "administration" cost center reimbursement. Community agency overhead is assumed to include all the costs associated with administrative staff, administrative clerical staff, office space costs, office operating expenses, insurance, management consultants, accounting, the cost of hiring staff, staff physical examinations, staff travel and training, conferences, conventions, association fees, and all other costs incurred in the overhead associated with the delivery of CILA supports.~~

b) ~~Nonbase support costs are expenses incurred due to the special added services required by specific persons living in CILAs to the extent allowed by the CILA rate model. Nonbase supports can include other individually required supports such as nursing, special dietary needs, and therapies. Nonbase support additions to the rate generated by the CILA rate model must be indicated as necessary by the interdisciplinary team (IDT), are not common to all individuals residing in CILAs, and may be required more intensely soon after an individual moves into a CILA, with decreasing need for them over time. Department staff review all requests for individual nonbase supports and must approve any hourly reimbursements added to an individual's CILA rate. Nonbase support hours must be periodically reaffirmed by professional assessment.~~

e) ~~An individual CILA rate includes reimbursement for costs associated with providing day programs to individuals living in CILA homes. For persons receiving day program supports that do not fit the definition of those with fixed rates, an "other day program" option is available. Community agencies that indicate the "other day program" selection must submit a description of the supports to be provided and a proposed annual budget for Department review. Individuals between the ages of 18 and 59 are expected to be participating in out-of-home, work-oriented day programs, unless there are medical or behavioral issues that prevent such participation.~~

d) ~~Third party payment information concerning an individual's earned and unearned income is obtained from the "Community Reimbursement Subsystem Financial Questionnaire", and used to calculate the third party payment. The third party payment may be subtracted from the top line rate to produce the bottom line rate, or the rate paid by the Department to the community provider agency.~~

5532

(Source: Repealed at 47 Ill. Reg. _____, effective _____)